

CAMERA B

REEL 81

PHILADELPHIA

PASSENGERS

167

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

MICROPHOTOGRAPHIC CERTIFICATION

I hereby certify that I am the legal custodian of the original record of the manifests of arriving aliens and United States citizens and of crew lists of arriving vessels duly delivered to the immigration authorities at the ~~PHILADELPHIA, PA.~~ Philadelphia Office, contained in the volumes enumerated below for vessels arriving in the ~~PHILADELPHIA, PA.~~ Philadelphia immigration district on the date indicated:

PHILADELPHIA, PA.

-276- March 3 - 1935-
-To June 30-1935-

that microphotographic copies of the above described original records appear on this roll of film; that in conformity with instructions received by me from the Commissioner of Immigration and Naturalization I caused originals to be microphotographed under my supervision and compared with the original documents; that the images appearing on this roll of microfilm are true and complete photographic copies of the above described original records; and that said original records have been microphotographed to serve as permanent records in accordance with all the requirements of Public 115, 78 Congress, First Session, approved July 7, 1943, and of the regulations promulgated by the National Archives Council and approved by the President of the United States in accordance with the provisions of Section 2 of said Act.

Executed in the County of Philadelphia, Commonwealth of Pennsylvania, this.....day of.....194....

OCT 26 1945

.....

CHIEF

Information, Mail and Files Section
Central Office
Immigration and Naturalization Service

CERTIFICATE OF CAMERA OPERATOR

I hereby certify that the microphotographic images appearing on this roll of film are true and complete microphotographic copies of original records of the Immigration and Naturalization Service described above. I operated the camera at the time these records were microphotographed.

OCT 26 1945

.....
Date

.....
Camera Operator

AFFIDAVIT OF SURGEON

I, _____, Surgeon of the _____, do
solemnly, sincerely, and truly _____ that I have had _____
(State whether Surgeon "sailing therewith" or "employed by
owner thereof," as the case may be)
years' experience as a Physician
and Surgeon, and that I am entitled to practice as such by and under the authority of _____
_____, and that I have made a personal examination of
each of the aliens named hereih, and that the foregoing Lists or Manifest Sheets, _____ in number, according
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical
condition of such aliens.

Sworn to before me this _____ day of _____, 19 _____
at _____

(Signature and title of immigration or other officer authorized to administer oaths)

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in
the condition of any of the aliens must be noted on the manifest before the affidavit is executed.
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and
the language they speak. The original stock or blood shall be the basis of the classifi-
cation, the mother tongue to be used only to assist in determining the original stock.

African (black).	Greek.	Roumanian.
Armenian.	Hebrew.	Russian.
Bohemian.	Herzegovinian.	Ruthenian (Russniak).
Bosnian.	Irish.	Scandinavian (Norwegians, Danes, and Swedes).
Bulgarian.	Italian (North).	Scotch.
Chinese.	Italian (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
Flemish.	Pacific Islander	West Indian (other than Cuban)
French.	Polish.	
German.	Portuguese.	

List BOOK #276

LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United
This (yellow) sheet is for the listing of

S. S.

Passengers sailing from

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1	2	3	4	5	6	7	8	9	10	11	12	13			
No. on List.	HEAD-TAX STATUS. (This column for use of Government officials only.)	NAME IN FULL		Age.	Sex.	Calling or occupation.	Able to—		Nationality. (Country of which citizen or subject.)	† Race or people.	* Last permanent residence.	Final destination. (*Intended future permanent residence.)			
		Family name.	Given name.	Yrs. Mos.	Married or single.		Read what language (or, if exemption claimed, on what ground).	Write.			The name and complete address of nearest relative or friend in country whence alien came.	State. City or town.			
		STEAMSHIP				MONTH AND DAY	YEAR	PAGE	STEAMSHIP				MONTH AND DAY	YEAR	PAGE
1		DARIEN				MARCH 3rd	1935	#1	MAR CANTABRICO				MAY 18	1935	59
2		WEST HUMHAW				" 4	"	2	TIVIVES				" 19	"	60
3		GULFWAX				" 6	"	3 - 4	CITY OF ELWOOD				" 22	"	61
4		VALLARSA				" 11	"	5	SURINAME				" 23	"	62-63
5		TIVIVES				" 11	"	6 - 8	DARIEN				" 26	"	64
6		BARBARA				" 14	"	9 - 10	RAIMUND				" 23	"	65
7		GULFHAWK				" 16	"	11	ESPARTA				" 30	"	66
8		MARTINIQUE				" 18	"	12	GULFBIRD				" 30	"	67
9		DELFINA				" 20	"	13	TIVIVES				JUNE 2	"	68
10		GULFBIRD				" 24	"	14	GRANADA				" 3	"	69
11		YORO				" 25	"	15-16	BARBARA				" 6	"	70-72
12		MARY WALTON				" 30	"	17	GULFWING				" 7	"	73
13		DARIEN				" 31	"	18-21	GULFPENN				" 8	"	74
14		TEAPA				APRIL 1	"	22	GATUN				" 9	"	75
15		BARBARA				" 4	"	23-25	TURRIALBA				" 9	"	76-77
16		GULFWAX				" 9	"	26	CAPULIN				" 14	"	78
17		CHRISTIAN KROHG				" 13	"	27	TIVIVES				" 16	"	79
18		ALDECOA				" 20	"	28	LIMON				" 17	"	80
19		WIND RUSH				" 21	"	29	GRANADA				" 17	"	81
20		EXIRIA				" 23	"	30-31	MALAY				" 18	"	82
21		SCANYORK				" 23	"	32-37	GULFHAWK				" 19	"	83-84
22		BARBARA				" 25	"	38-40	MALAREN				" 19	"	85
23		FRIEDRICH ENGLES				" 26	"	41	TURRIALBA				" 23	"	86
24		DARIEN				" 26	"	42	GATUN				" 23	"	87-88
25		GULFBIRD				" 27	"	43	GOSLAR				" 24	"	89
26		ELSWICK PARK				" 30	"	44	GULFBIRD				" 24	"	90-91
27		MASAYA				MAY 1	"	45	BARBARA				" 27	"	92-94
28		GULFWING				" 5	"	46-47	TIVIVES				" 30	"	95-96
29		TIVIVES				" 5	"	48							
30		RUTH KELLOGG				" 5	"	49							
		GULFHAWK				" 6	"	50							
		COIMBRA				" 6	"	51							
		MANATAWNY				" 7	"	52							
		YOMACHICHI				" 7	"	53							
		ORISKANY				" 9	"	54							
		DARIEN				" 12	"	55							
		GULFBIRD				" 13	"	56							
		ESPARTA				" 15	"	57							
		GOV. JOHN LIND				" 17	"	58							

Total passengers

U. S. citizens

Aliens

* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.
† List of races will be found on the back of this sheet.

States, or a part of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

Arriving at Port of

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[illegible]

NOTE.—Full text of question 24 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

AFFIDAVIT OF THE MASTER-OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, _____, of the _____, from _____, do solemnly, sincerely, and truly _____ that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, _____ in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this _____ day of _____, 19____, at _____, _____ Officer.

Immigration Officer.

INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (*Head-tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be either M (male) or F (female).

Column 6 (*Married or single*).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (*Able to read and write*).—This column is subdivided and contains the following question: "Read what language for, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Nationality*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN.

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN.

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN.

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK).

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH).

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria-Hungary, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH).

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 11 should show the country and city or town of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 12 (*Name and complete address of nearest relative or friend in country whence alien came*).—The entry should give name and address of such relative. If no such relative living, give name and address of friend.

Column 13 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States.

Column 15 (*Whether having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 16 (*By whom was passage paid*).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 17 (*Whether in possession of \$50, and if less, how much*).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 18 (*Whether ever before in the United States; and if so, when and where*).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia.

Column 19 (*Whether going to join relative or friend; and if so, what relative or friend*).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Columns 20 to 33.—These questions are self-explanatory and the answers, like all others on the sheet are subject to revision by inspection officers in the examination of aliens. However, in answering question 20, if alien has been deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number.....

Sam
Pan. S. S. Lauen sailing from *Porto Bivris, Grt.* *2/23, 1935*, Arriving at Port of *Phila., Pa.* *3/3, 1935*

No. ON LIST	NAME IN FULL		AGE	SEX	MARRIED OR SINGLE	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	FAMILY NAME	GIVEN NAME						
1	Considine	Major John	45	M		Chicago, Ill., 3/10/89	Special Atty. 576 Wash. D.C. 3/3/35	2815 Woodley Rd., N.W., Washington, D.C.
2		(usam)						
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*Transferred from 2nd manifest
1. Admitted 3/3/35
Chas. Lewis
Inspector*

Line.....
Owners.....
Local Agent.....

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number ONE

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "WEST HUMHAW"

Sailing from

Freetown, Sierra Leone,
Conakry, French Guinea,
West Africa.

February 15, 1935

35

February 15, 1935

Arriving at Port of

PHILADELPHIA, Pa.

March 4th, 1935

No. on List.	NAME IN FULL		AGE Yrs. Mos.	SEX	MARRIED OR SINGLE	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY-OR TOWN AND STATE).	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS.	ADDRESS IN UNITED STATES.
	FAMILY NAME	GIVEN NAME						
1	NIELSEN	CHRISTIAN K.	31 7	M	M	July 3rd, 1903 - Brooklyn, N.Y.	Am. passport # 71211 issued Wash. D.C. 12/4/33	C/o Riddle, 25, Fairview Ave., Port Washington, L.I., NY.
2	PACE	ERNEST J.	55 3	M	M	Nov. 11th, 1879 - Columbus, Ohio.	Am. passport # 76696 issued Wash. D.C. 12/1/34	
3	PACE	CORNELIA P.	56 8	F	M	June 29th, 1878 - Westfield, NY.	Am. passport # 102701 issued Wash. D.C. 5/19/34	Box #824, Orlando, Fla.
4	MARTIN	WILLARD S.	45 2	M	M	Jan. 14th, 1890 - Sioux City, Iowa.	American passport # 15 issued Canton, Mass. at American Consul 4/3/34	- do - - do - 260 - West 44th Street, New York City, N.Y.
5	MARTIN	JENNIE	39 4	F	M	Oct. 4th, 1895 - Lookwood, Mo.	" " " " " "	- do -
6	MARTIN	DANIEL E.	9 9	M	S	May 22nd, 1934 - Gao, French Soudan Africa.	" " " " " "	- do -
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Master, S/S "WEST HUMHAW".

2

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



AFFIDAVIT OF SURGEON

I, Jose Antonio Diaz Surgeon of the Venezuela Govt, do
solemnly, sincerely, and truly that I have had four years' experience as a physician
and Surgeon, and that I am entitled to practice as such by and under the authority of Venezuela Govt,
and that I have made a personal examination of
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical
condition of such aliens.

Sworn to before me this 27th day of February, 1935.
at Las Piedad, Venezuela

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in
the condition of any of the aliens named herein shall be noted on the manifest before the affidavit is executed.
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and
the language they speak. The original stock or blood shall be the basis of the classifica-
tion; the mother tongue to be used only to assist in determining the original stock.

African (black).	Greek.	Roumanian.
Armenian.	Hebrew.	Russian.
Bohemian.	Herzegovinian.	Ruthenian (Russiak).
Bosnian.	Irish.	Scandinavian (Norwegians, Danes, and Swedes).
Bulgarian.	Italian (North).	Scotch.
Chinese.	Italian (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
Flemish.	Pacific Islander.	West Indian (other than Cuban).
French.	Polish.	
German.	Portuguese.	

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this form.

S. S. Sulfwar

Passengers sailing from Las Piedras, Mex

5/27

1935

Total passengers	1,000
U. S. citizens	1,000
Aliens	1,000

* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more. List of races will be found on the back of this sheet.

▲ Y T 3 7 A 8 02 T K 0 9 U 0

List

The entries on this sheet must be typewritten or printed.

24	25	26	27	28	29	30	31	32	33	34	35	36	37
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³ Note: Full text of question 23 is as follows: "Whether a person who induces or in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who abets such person, is organized government or who advocates the assassination of public officials, or who induces or teaches the unlawful destruction of property, or is a member of an affiliated with a organization to assassinate and teaches in which in or position in organized government or which teaches the unlawful destruction of property, or is a member of the duty necessary to property of the individual assassination or killing of any officer or officers, either of specific individuals or of the is generally, of the Government of the United States or of any other organized government located. (For or their official character."

AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Master, of the S.S. Guilford, from Las Cruces, N.M., do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

H. Muller
Master-Officer.

Sworn to before me this 6th day of June, 1918
at Las Cruces, N.M.
Immigration Officer.

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class, and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective families are listed.

Column 2 (Head-tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M (male) or F (female).

Column 5 (Married or single).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as craftsman, polisher, molder, farmer, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language?" If, for example, the alien is able to read and write, in answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the answer for such exemption should be given.

Column 9 (Country of birth).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entries should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "French" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "French" by country. An Irish, German, or Polish alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "M.V." or "N.I.V." or "P.V." or "R.P." as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved in Section 4 (a).

Column 13. This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Exemption or landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual, or an intended residence, of one year shall constitute permanent residence. The last country in which a person resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entry in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show a country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of nearest relative or friend living in country whence alien came, give name, address, and relationship of relative or friend in country of which citizen or subject. If such country is not known, then that whence alien came. Address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute future permanent residence. The entry should show definitely the place, city, or town, of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such place of destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative, or steamship company, etc.

Column 21 (Whether in possession of money and if how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States and if so, when, place, and date of last departure).—The entries should show whether or not (Yes or No) the alien has been in the United States before; and if so, the year (or period of years) and place, as, for example, Philadelphia. Where in the United States more than once previously, indicate last visit only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 26. These questions are self-explanatory and the answer should be given on the sheet, and subject to decision by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

ITALIAN (see III)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "M.V." or "N.I.V." or "P.V." or "R.P." as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved in Section 4 (a).

Column 13. This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Exemption or landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual, or an intended residence, of one year shall constitute permanent residence. The last country in which a person resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entry in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show a country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of nearest relative or friend living in country whence alien came, give name, address, and relationship of relative or friend in country of which citizen or subject. If such country is not known, then that whence alien came. Address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute future permanent residence. The entry should show definitely the place, city, or town, of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such place of destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative, or steamship company, etc.

Column 21 (Whether in possession of money and if how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States and if so, when, place, and date of last departure).—The entries should show whether or not (Yes or No) the alien has been in the United States before; and if so, the year (or period of years) and place, as, for example, Philadelphia. Where in the United States more than once previously, indicate last visit only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 26. These questions are self-explanatory and the answer should be given on the sheet, and subject to decision by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

GUIN

The term "Guin" refers to the Guin people (not Negroes).

WEST INDIES

"West Indian" refers to the people of the West Indies other than either Guin or Negro.

SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other island of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classed under this heading.

ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

Report on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port, or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Arr. S. S. Gulfport

sailing from San Francisco

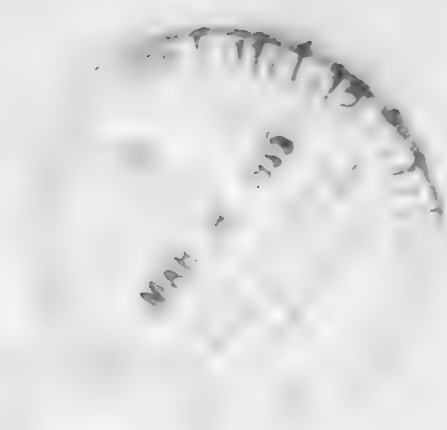
Feb 27, 1935

Arriving at Port of Philadelphia

March 1, 1935

No. Line	NAME IN FULL Family Name Given Name Vice Mrs.	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN) AND STATE.	IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS.	ADDRESS IN UNITED STATES
1	Johnson	Philip Isaac 40 y m Chicago, Ill. July 20, 1894	Immigrant Inspector Admitted at Philadelphia March 1, 1935	523 W 10 St New York N. Y.
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
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25				
26				
27				
28				
29				
30				

- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
 2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon each manifest opposite the names of those members who claim citizenship.
 3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
 4. List on this form only United States citizens or citizens of an insular possession of the United States.



AFFIDAVIT OF SURGEON

I, _____, Surgeon of the _____, do
solemnly, sincerely, and truly that I have had _____
and Surgeon, and that I am entitled to practice as such by and under the authority of _____
years' experience as a Physician
_____, and that I have made a personal examination of
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, _____
in number, according
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical
condition of such aliens.

Sworn to before me this _____ day of _____, 19____
at _____

NOTE: If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in
the condition of any of the aliens must be reported on the next report before the affidavit is re-examined.
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized local official.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and
the language they speak. The original stock or blood shall be the basis of the classifi-
cation, the mother tongue to be used only to assist in determining the original stock.

African (black).	Greek.	Roumanian.
Armenian.	Hebrew.	Russian.
Bohemian.	Herzegovinian.	Ruthenian (Rusniak).
Bosnian.	Irish.	Scandinavian (Norwegian, Danes, and Swedes).
Bulgarian.	Italian (North).	Scotch.
Chinese.	Italian (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
Flemish.	Pacific Islander.	West Indian (other than Cuban).
French.	Polish.	
German.	Portuguese.	

List 1

LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (white) sheet is for the listing of

3559

S. S. *Yallarsa* (9th.)

Passengers sailing from *Huelva, Spain.*

1935

No. on List.	HEAD-TAX STATUS. (This column for use of Government officials only.)	NAME IN FULL		Age		Sex	Calling or occupation.	Able to—		Nationality, (Country of which citizen or subject.)	Race or people.	* Last permanent residence.		Final destination.	
		Family name.	Given name.	Yrs.	Mos.			Read.	Write.			Country.	City or town.	The name and complete address of nearest relative or friend in country whence alien came.	State. City or town.
1		<i>Keller</i>	<i>Jean</i>	22	11	<i>M</i>	<i>Merchant</i>	<i>Yes</i>	<i>Yes</i>	<i>French</i>	<i>German</i>	<i>Switzerland</i>	<i>Olten</i>	<i>Walter Keller, Zurich, Switzerland, Penna Philadelphia</i>	
2		<i>Martin</i>	<i>Alfredo Barrera</i>			<i>S</i>	<i>Artist</i>	<i>Yes</i>	<i>Yes</i>	<i>Spain</i>	<i>Spanish</i>	<i>Spain</i>	<i>Burdeos</i>	<i>Father, Alfredo Barrera, Calle Correo 25, Burdeos</i>	
3		<i>Cipres</i>	<i>Leandro Cipres</i>			<i>S</i>	<i>Mariner</i>	<i>Yes</i>	<i>Yes</i>	<i>do</i>	<i>do</i>	<i>do</i>	<i>do</i>	<i>Mother, Maria Cipres, Calle Nueva de San Ramon 30, Barcelona, Spain</i>	

See file 4399/44.
Aliens excluded by B.S. - no appeal

Total passengers
U. S. citizens
Aliens

* Permanent residence within the meaning of this manifest shall be that of the alien at the time of his departure from the country of origin. If the alien has no permanent residence, the country of birth shall be entered in this column.

List

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

[illegible]

NOTE: The full text of question 21 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States, or of all Federal law, or of all belief in or support of the organized government, or who advocates the government of public officials, or who advocates or has had the motive for destruction of property, or is a member of an organization with any such motive and teaches or believes in or is a party to a law-violating conspiracy in which he has a substantial part to play in the destruction of property, or in the destruction of the duty, necessary or necessary, of the national government, or the killing of a officer or officers, either of specific individuals or of officers generally, of the Government of the United States, or of any other organized government because of his or their official character."

AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, _____, of the _____, from _____, do solemnly, sincerely, and truly _____ that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, _____ in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Officer.

Sworn to before me this _____ day of _____, 19____

at _____

Immigration Officer.

INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (Head or stated).—Steamship lines should make countries in this column. The space is for use of government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example, (1) self-employed, stationary engineer, locomotive engineer, rubber engineer, brass polisher, steel polisher, iron molder, wood turner, etc.; and not simply as cook, porter, steward, farmer, or other indefinite designations. A distinction should be made between farmer and farm laborer, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (The reason for entry).—This column is subdivided and contains the following question: Read what language (or, if exemption is claimed, upon what ground)? In answering this question, the name of the country of last permanent residence should be given. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people of each alien.

Special attention should be paid to the distinction between race and the country of which a citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully checked by inspectors and registry clerks in this regard. For instance, "French" appearing under the last column does not mean "French" by race or people, and, similarly, "French" appearing under "country of last permanent residence" does not mean "French" by country. An Irish, German, or Hebrew alien by race would be people of the land of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN.

The term "Cuban" refers to the Cuban people and Negroes.

WEST INDIAN.

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH-AMERICAN.

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN-AMERICAN.

"African American" refers to the African Negroes, whether coming from Colonization islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN—NORTH.

The people who are native to the north of Italy, namely, Italy, the departments of Piedmont, Lombardy, Veneto, and Trieste, and their descendants, should be classified as "Italian—North." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN—SOUTH.

The people who are native to that portion of Italy south of the boundary line between the departments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi, and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia and their descendants should be classified as "Italian—South."

Column 11 (Last permanent residence).—An alien or an intended resident of one year shall continue permanent residence. The last country in which alien resided with their family, if permanent one year or more shall be the last permanent residence recorded here. If alien is alone, the last permanent residence in column 11 should show the country and city or town of last permanent residence. If an alien is a student, the country of last permanent residence should be shown, and the country of last permanent residence of the alien should be shown in column 11.

Country of last permanent residence of a person who has been in the United States and has returned from a visit abroad should be recorded in United States.

Column 12 (Name and complete address of nearest relative residing in foreign country).—The entry should give name and address of such relative. If no such relative living, give name and address of friend.

Column 13 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry shall show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States.

Column 14 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 15 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 16 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 17 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 18 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 19 (If he has ever been in the United States).—The answer should be either "Yes" or "No."

Column 20 to 33.—These questions are self-explanatory and the answers, by all other means, are subject to revision by inspection officers in the examination of cases. However, in answer to question 25, if alien has been deported within one year and the passport of alien has not been given to reply for admission, the authority for such reappearance should be given.

AFFIDAVIT OF SURGEON

I, Dr. Remola E., Surgeon of the Port of Santos, Guatemala, do solemnly, sincerely, and truly swear that I have had ten years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of The Medical Laws of Republic of Guatemala and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Signed to before me this 3rd day of March, 1935
at Santos, Guat.

E. B. Austin
(In absence of American Consul)
Scribe at this Port

NOTE: If a surgeon sails with the vessel, this affidavit of verification shall be executed before an authorized officer of port of arrival, and not before a notary public, and shall be filed in the office of the port of arrival. If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized administrative officer.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

African (black).	Greek.	Rumanian.
Armenian.	Hebrew.	Russian.
Bohemian.	Hercegovinian.	Ruthenian (Russians).
Bosnian.	Irish.	Scandinavian (Norwegians, Danes, and Swedes).
Bulgarian.	Italian (North).	Scotch.
Chinese.	Italian (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
Flemish.	Pacific Islander.	West Indian (other than Cuban).
French.	Polish.	
German.	Portuguese.	

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this form.

3560

U. S. S.

TTIVIVES

Passengers sailing from PTO. BARRIOS, GUATEMALA

MARCH, 4, 1935

No. on List	HEAD-TAX STATUS <small>(This column for use of Government officials only)</small>	NAME IN FULL	Age	Sex	Married or single	Calling or occupation	Able to— Read	Read what language or if exemption claimed, on what ground?	Nationality, Country of which citizen or subject	Race or people	Place of birth	Immigration Visa, Passport Visa, or Reentry Permit number <small>Prefix number with QV, NQV, PV, or RP and give section of act involved.</small>	Issued Place Date	Data concerning verifications of landings, etc. <small>This column for use of Government officials only.</small>	*Last permanent residence Country City or town, State, Province or District	
1	LIND	WALTER	58	M	M	DIRECTOR	YES	ENGLISH	YES	BRITISH	SCANDINAVIAN ENGLAND	LONDON	T.V.# 73 SER.# 103 Sec.3(2)	Guatemala City 2/18/35	Guatemala	City
2	LIND	RANDI	55	F	M	HOUSE WIFE	YES	ENGLISH	YES	BRITISH	SCANDINAVIAN NORWAY	HER GEN	T.V.# 73 SER.# 123 Sec.3(2)	Guatemala City 2/18/35	Guatemala	City

Received and admitted
Lowell Brown
U. S. IMMIGRANT INSPECTOR

To sailing for London Eng 3/27/35

H-1 Dec # 206100
 2/14/35
 m2

Total passengers	10	16
U. S. citizens	7	2
Aliens	13	5

* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.
† Listed races will be found on the back of this sheet.

List 1

The entries on this sheet must be typewritten or printed.

No. on List	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37
		The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject.	Final destination <small>*Intended future permanent residence</small>	Whether having a ticket to such final destination	By whom was passage paid? <small>Whether alien paid his own passage, whether paid by relative, whether paid by any other person or by any corporation, society, municipality or government.</small>	Whether in possession of \$50. and if less, how much.	Whether ever before in the United States, and if so, when and where? <small>Last residence and:</small>	Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship	Purpose of coming to United States <small>Whether alien intends to remain in the United States for a permanent home, or whether he came after receiving temporary admission, or whether he came to the United States for a limited period of time, after which he intends to return to his native country or to some other foreign country.</small>	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.
			Foreign country via port of departure	State	City or town	Yes or No	Year or period of years	Where?	Date of last departure	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	Whether alien intends to be employed in the United States.	
1		Friend, Gordon Smith Guatalon, Guatemala	England via			No	Self	YES YES 1930	New March York 1930	NO. INTRANSIT	IN TRAN SIT	2 Wks	No	No	No	No	No	No	No	No	No	
2		Friend, Gordon Smith Guatalon, Guatemala	England via New York			No	Husband	YES YES 1930	New March York 1930	NO. INTRANSIT	IN TRAN SIT	2 Wks	No	No	No	No	No	No	No	No	No	

2 aliens
named S. K.
O. K. K. K. K.
A. A. Surge
u. s. s.

2 letters
dated 8.1.18
O. H. Campbell
A. A. Surgeon
U. S. G. M.

Note.—Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disobeys civil or is opposed to organized government or who advocates the assassination of public officials or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

Line UNITED FRUIT CO.
Owners UNITED FRUIT STEAMSHIP CORP.
Local Agents UNITED FRUIT CO.

AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, **FRANK ANGUIS**, **MASTER**, of the **AMER.S/S TIVIVES**, from **PTO. PARRIOS, GUATEMALA**, do solemnly, sincerely, and truly **SWEAR** that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, **ONE (1)** in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this **11th** day of **MARCH**, 1935, at **PHILADELPHIA, PA.**

Robert H. McNeil
Immigrant Inspector.

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1921; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Home file status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be either M (male) or F (female).

Column 6 (*Married or single*).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (*Occupation or profession*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example, Civil engineer, stationary engineer, locomotive engineer, mining engineer, glass polisher, steel polisher, iron moulder, wood turner, etc., and not simply as engineer, polisher, moulder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the owner who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of alien arrivals.

Column 8 (*Ability to read and write*).—This column is subdivided and contains the following questions: "Read what language, per, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Antecedents*).—Question 1 should be restricted to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which alien is a citizen or subject, as shown by the examples in this column. For instance, "French" appearing under the head of country does not mean "French" by race or people, and, similarly, "Italian" appearing under the head of race of people does not mean "Italian" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN
The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN
"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN
"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)
"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)
The people who are native to the basin of the River Po in northern Italy (i.e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Galla dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i.e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*).—Prefix serial number of document with abbreviation "QIV," "XIV," "IV," or "R," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Verification of landing, etc.*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living in country whence alien came, give name and address of relative or friend living in country of which alien is citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (*Intend destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town, of the United States, and port of intended departure.

Column 19 (*Whether having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (*Whether in possession of \$20, and if less, how much*).—The answer should give in each case (individual or family) the exact amount of money at own disposal, and give exact or approximate date of last departure from the United States, when the money was brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States; and if so, when, where, and date of last departure*).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia. Where in the United States more than once previously, indicate last and date of last departure, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*).—If answer is "Yes," give name and address of relative or friend to whom alien is going to join, with name and complete address, and date of last departure.

Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to review by inspection officers in the examination of aliens. However, in answering question 26, if alien has been deported and deported within one year, and in answering 31, if alien has been deported and deported at any time, authority in the Secretary of Labor to require for admission, when the shown.

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Standard 21

LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. TIVIVES

sailing from PTO. BARRIOS, GUATEMALA, , MARCH, 4, , 1935, Arriving at Port of PHILADELPHIA, PA. MARCH, 14, , 1935

No. on List	NAME IN FULL		AGE	Sex	Married or Single	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	FAMILY NAME	GIVEN NAME						
✓ 1	RICKETSON	EDITH	35	F	M	DEC. 20, 1899. FAJARDO, P.R.	N.S.P.P. No 556595	D.C. 2131 R. STREET N.W. WASHINGTON
✓ 2	RICKETSON	MARY	8	F	S	MAY, 16, 1926. BOSTON, MASS.	issued Washington 7/23/32 Expired Boston Oct 9/34 Expired Sept 22/36	D.C. 2131 R. STREET N.W. WASHINGTON
3								
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28								
29								
30								

Admitted as U.S. Citizen
by J. P. Nolan
U. S. IMMIGRANT INSPECTOR

United Fruit Co.
Consolidated

7

Line UNITED FRUIT CO.
Owners UNITED FRUIT STEAMSHIP CORP.
Local Agents UNITED FRUIT CO.

IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port or a port of continental United States, or a port of another insular possession.

Number 21

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. TIVIVES

sailing from PTO. BARRIOS, GUATEMALA, , MARCH, 4, , 1935, Arriving at Port of PHILADELPHIA, PA. MARCH, 14, , 1935

No. on List	NAME - FULL		AGE	Sex	MARRIED OR SINGLE	IF NATIVE OF UNITED STATES (INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE))	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	Family Name	Given Name						
✓ 1	RICKETSON	✓ EDITH	35	3	F M	DEC. 20, 1899. FAJARDO, P.R.	U.S.P.P. No 536595	D.C. 2131 R. STREET N.W. WASHINGTON
✓ 2	RICKETSON	MARY	8	9	F S	MAY, 16, 1926. BOSTON, MASS.	issued Washington 7/23/32 Extended Boston Oct 9/34 Expired Sept 20/36.	D.C. 2131 R. STREET N.W. WASHINGTON
3								
4								
5								
6								
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20								
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26								
27								
28								
29								
30								

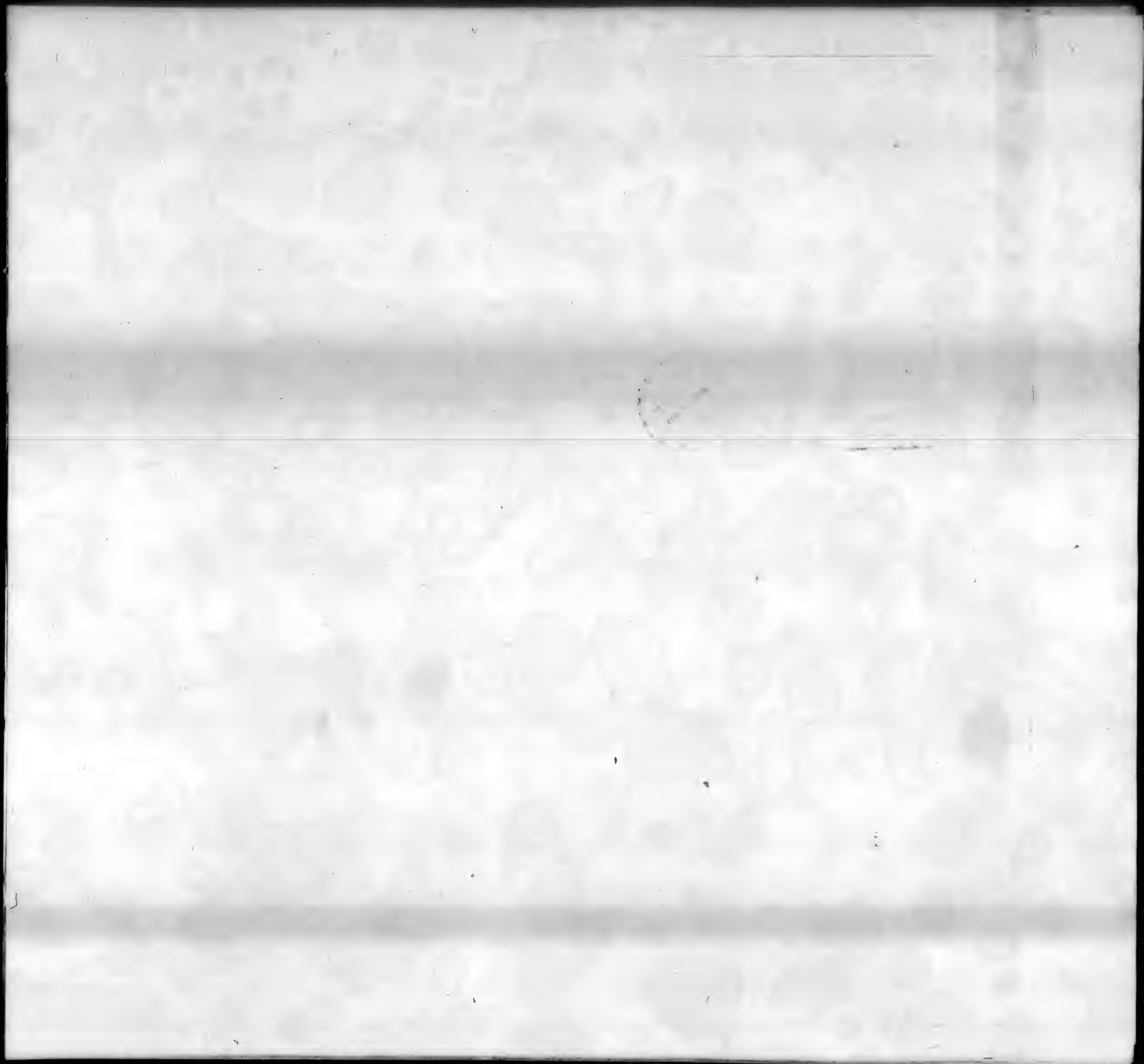
Admitted as U.S. Citizens
by J. S. Nolan
U. S. IMMIGRANT INSPECTOR

United Fruit Co.
Covers and agent

7

Line UNITED FRUIT CO.
Owners UNITED FRUIT STEAMSHIP CORP.
Local Agents UNITED FRUIT CO.

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



AFFIDAVIT OF SURGEON

I, Sabedier M. W. Harris, Surgeon of the U. S. S. Albatross, do solemnly, sincerely, and truly swear that I have had 15 years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the State of New York, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 27 day of June, 1915
at San Francisco, Cal.
J. J. [Signature]
Notary Public

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration inspector at port of arrival, and also at such time as may have occurred en route in the condition of any of the aliens must be noted on the manifest before the vessel's departure.
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some official authorized to administer oaths.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

African (black).	Greek.	Roumanian.
Armenian.	Hebrew.	Russian.
Bohemian.	Hercegovinian.	Ruthenian (Rusniak).
Bosnian.	Irish.	Scandinavian (Norwegians, Danes, and Swedes).
Bulgarian.	Italian (North).	Scotch.
Chinese.	Italian (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
Flemish.	Pacific Islander.	West Indian (other than Cuban).
French.	Polish.	
German.	Portuguese.	

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this sheet.

Passengers sailing from PTO. CORTES, HOND.

, FEBRUARY, 27th , 1985

No. on List	HEAD-TAX STATUS <small>This column for use of Government officials only</small>	NAME IN FULL		Age	Sex	Calling or occupation	Able to		Nationality, Country of which citizen or subject	Race or people	Place of birth		Immigration Visa, Passport visa, or Reentry Permit number	Issued		Data concerning verifications of landings, etc.	*Last permanent residence	
		Family name	Given name	Yrs. Mss.	Married or single		Read	Write			Country	City or town, State, Province or District		Place	Date		Country	City or town, State, Province or District
514 6/9/07	✓	Diaz	Esteban	38 4	M M	Setter	Yes	Spanish	Yes	Honduras	American	Honduras Tegucigalpa	P.V.#31 Tegucigalpa	Sec 3(2) Honduras	2/19/35		Honduras	Tegucigalpa
2		Diaz	Roberto	15 9	M S	Student	Yes	Spanish	Yes	Honduras	Spanish	Honduras Tegucigalpa	P.V.#31 Tegucigalpa	Sec.3(2) Honduras	2/19/35		Honduras	Tegucigalpa
3	✓	Diaz	Alicia	13 3	F S	Student	Yes	Spanish	Yes	Honduras	American	Honduras Tegucigalpa	P.V.# 31 Tegucigalpa	Sec.3(2) Honduras	2/19/35		Honduras	Tegucigalpa
4	✓	Diaz	Esteban A.	8 5	M S	Student	Yes	Spanish	Yes	Honduras	Spanish	Honduras Tegucigalpa	P.V. # 31Tegucigalpa	Sec 3(2) Honduras	2/19/35		Honduras	Tegucigalpa
6/9/08		Zepeda Duren	Fernando	41 3	M M	Journalist	Yes	Spanish	Yes	Honduras	Spanish	Honduras Tegucigalpa	P.V.32 Tegucigalpa	Sec 3(2) Honduras	2/19/35		Honduras	Tegucigalpa
6/11/07		Zepeda Andino	Gabriel	29 9	M M	Photo- graveur Operator	Yes	Spanish	Yes	Honduras	American	Honduras Comayaguela	P.V.# 33 Tegucigalpa	Sec3(2) Honduras	2/23/35		Honduras	Tegucigalpa
7	✓	Haddad Brooks	Rosylinda	22 3	F S	Student	Yes	Spanish	Yes	Honduras	Spanish	Honduras Comayaguela	P.V.#12 Tegucigalpa	Sec3(2) Honduras	2/23/35		Honduras	Tegucigalpa
8		Vasquez	Lydia	44 7	F W	Domestic	Yes	Spanish	Yes	Honduras	Turkish	Honduras Tegucigalpa	R.P.#1006362 Washington D.C.	Sec.4(C) Honduras	2/23/35		Honduras	Tegucigalpa
9		Vasquez	Mary	9 3	F S	Student	Yes	Spanish	Yes	Honduras	American	Honduras Juticalpa	R.P.#1005753 Washington D.C.	Sec.10	11/16/35		U.S.A.	NEW YORK
10		Nejia Bohanerges		26 1	M S	Student	Yes	Spanish	Yes	Honduras	American	Salvador Salvador	Sec.10	Washington D.C.	11/12/35		U.S.A.	NEW YORK
												Honduras Catacamas	I.V.#11. Tegucigalpa	Sec.4(C) Honduras	2/13/35		Honduras	Tegucigalpa

Must be Tennessee River and admitted. Passes on line 8 and 10 days

Loves. P. 1000

U. S. IMMIGRANT INSPECTOR

Wm. L. Smith & Co
Grocers and Ice Merchants

11/10/10

Total passengers	18	16
U. S. citizens	7	2
Aliens	12	8

* Permanent residence within the meaning of this statute, shall be actual or intended residence of one year or more.

List 2

The entries on this sheet must be typewritten or printed.

Arriving at Port of ~~NEW YORK, N.Y.~~ PHILADELPHIA, PA. ~~MARCH, 15,~~ MAR 11 1935. 19 35.

7 Alives

¹ Note: A full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who believes in or is possessed by organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of, or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the destruction, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."

Line United Fruit Co.
Owners United Fruit Steamship Corp.
Local Agents United Fruit Co.

AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Frank Owens, of the United States, from Philadelphia, Pa.,
solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the
foregoing Lists or Manifest Sheets, given in number, and that from the report of said surgeon and from my own
investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by
laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said
Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 11 day of March 1936
at _____

Wm. J. Henry
Immigrant Inspector.

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest-sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 7 (*Sex*). The entry should be either M (male) or F (female).
 Column 8 (*Married or single*). The answer should be M (married), S (single), Wd (widowed), or D (divorced).
 Column 9 (*Calling or occupation*). The entry should describe as accurately as possible the occupation, trade, or profession of each when arrival, as, for example, Civil engineer, stationary engine r, locomotive engineer, mining engineer, brass maker, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other non-*trade* designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

- A farmer is one who operates a farm, either for himself or for others.
- A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of alien arrivals.

Column 8 (*Ability to read and write*).—The column is subdivided and contains the following questions: "Read what language [or, if description is assumed, *what what language*]." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Naturalization*).—Question 9 should be restricted to mean the country of which alien is a citizen or subject.

(Column 10) *Name or people*—See list of names printed at back of this sheet. The entry should show the name or people as given in said list.

Special attention should be paid to the distinction between race and the nationality of each citizen or subject, country of last permanent residence, and country of birth, and mistakes should be carefully reviewed by inspectors in the record. For instance, "Franco" appearing under the head of country does not mean "French" (i.e. race or people, and, incidentally, "French" occurring under the head of race or people does not mean "Franco" by country). As Irish, German, or Hebrew when by race, might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CHAN

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other Islands of the West Indies, North or South American, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Etnedja) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11* (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

^a Column 12 (*Serial number of document presented*). Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and note date section of the Immigration Act of 1924 involved, in Section 4 (a).

Column 13. This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Verifications of breeding, etc.*) - Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Place permanent residence*). Actual or an habitual residence of one year shall constitute permanent residence. The 15th country in which an individual resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence there. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that somewhat comparable countries show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad. Should be recorded "United States."

Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*). The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen of subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (*Future destination*).—The answer to this question shall show the intended future permanent residence. An intended address of one year shall constitute permanent residence. The entry should show definitely the place (city and county) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (*Whether leaving a ticket to such final destination*)—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*)—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$50, and if less, how much). The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States and if so, when, where, and date of last departure). The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, say, 1894-1897, Philadelphia. Where in the United States more than once previously, indicate last residence only, and never grant or approve a date of last departure from the United States.

Column 23 is *W'ether going to join relative or friend*. The answer should show whether going to join either a relative or friend, with name and complete address and if a relative, the exact relationship.

Columns 24 to 30. These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspectors officers in the course of an audit. However, in answering question 30, if alien has been expelled and deported within one year, and in answering 31, if alien has been ordered deported under warrant at any time, authority in the Secretary of Labor to reapply for admission must be shown.

AFFIDAVIT OF SURGEON

I, Mariano Cajigas, M.D., Surgeon of the Maritime ss. "177111", Cellar Therewith, do solemnly, sincerely, and truly swear that I have had Four years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners of Puerto Rico, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, One in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Mariano Cajigas, M.D.

Sworn to before me this 10 day of June, 1917

at Puerto Rico

Note - If a surgeon fails with the vessel, this affidavit is null and void, and the vessel is liable for the cost of the affidavit, and if any change that may be necessary, it shall be made by the vessel, and the vessel is liable for the cost of the affidavit.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

African, black.	Greek.	Romanian.
Armenian.	Hebrew.	Russian.
Balkanian.	Hungarian.	Ruthenian (Rumanian).
Berber.	Irish.	Scandinavian (Norwegians, Danes, and Swedes).
Bulgarian.	Irish (North).	Scotch.
Chinese.	Irish (South).	Servian.
Croatian.	Japanese.	Slovak.
Cuban.	Korean.	Slovenian.
Delawarean.	Lithuanian.	Spanish.
Dutch.	Magyar.	Spanish American.
East Indian.	Mexican.	Syrian.
English.	Montenegrin.	Turkish.
Finnish.	Moroccan.	Welsh.
French.	Pacific Islander.	West Indian (other than Cuban).
German.	Polish.	
	Portuguese.	

STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List 1

The entries on this sheet must be typewritten or printed.

Ships, or a part of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer FIRST-CABIN PASSENGERS ONLY

Arriving at Port of Philadelphia, Pa., March 14, 1936

No. on List	The name and complete address of nearest relative or friend in country whence alien came	Final destination (*Intended future permanent residence)	By whom was passage paid?	Whether over before in the United States; and if so, when and where?	Whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address	Purpose of coming to United States	Whether a polygamist	Whether an anarchist	Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization, association and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.	Condition of health, mental and physical	Deformed or crippled, Nature, length of time, and cause	Height	Color of hair	Color of eyes	Marks of identification							
		State	City or town	Yes or No	Year or period of years	Where?						Feet	Inches	Hair	Eyes							
1	Friend: Albert Wright, Central Aguirre, P. R.	England	Leeds	Yes Self	1931 to 1935	P.R.	Mother: Mrs. Wood, 20 Talip St., Leeds, England	No	Leaving from New York	No	No	No	No	No	No	No	Good	No	5 9 1/2	Fair	Fair	Gr. None
2	do.	do.	do.	Yes Husband	1932 to 1935	P.R.	Mother in law, as above	No	March 18	No	No	No	No	No	No	No	Good	No	5 2	Brn.	Brn.	Gr. None
3	do.	do.	do.	Yes Father	1933	Born in P.R.	Grandmother, as above	No	Scythia Ounard S/S Co. for Liverpool	No	No	No	No	No	No	No	Good	No	5 8	Fair	Fair	Gr. None

2 aliens Examined
Came 2.14
W. R. R. H. S.

Form 546 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)
U. S. DEPARTMENT OF LABOR
No. 60545
No Head Tax Due IMMIGRATION SERVICE
Port of San Juan, P. R.
March 9, 1936
This is to certify that the alien Epelime Robertshaw native of England, citizen of Great Britain and of the Eng. race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:
Admitted at San Juan, P. R., 1933, ex S. S. Blue 48-11
Status under Immigration Act of 1924 when admitted Permanent
Said alien is about to proceed to England via the seaport of New York and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.
Personal description of alien: Age, 27; Height, 5 1/2; Color of hair, Brn.
Color of eyes, Gray
Identifying documents in alien's possession Passport
Signature of alien Epelime Robertshaw
Surrendered at San Juan, P. R. to Inspector J. M. ... 3/14, 1936

Form 546 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)
U. S. DEPARTMENT OF LABOR
No. 60546
No Head Tax Due IMMIGRATION SERVICE
Port of San Juan, P. R.
March 9, 1936
This is to certify that the alien Epelime Robertshaw native of England, citizen of Great Britain and of the Eng. race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:
Admitted at San Juan, P. R., 1933, ex S. S. Blue 48-11
Status under Immigration Act of 1924 when admitted Permanent
Said alien is about to proceed to England via the seaport of New York and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.
Personal description of alien: Age, 27; Height, 5 1/2; Color of hair, Brn.
Color of eyes, Gray
Identifying documents in alien's possession Passport
Signature of alien Epelime Robertshaw
Surrendered at San Juan, P. R. to Inspector J. M. ... 3/14, 1936

Form 546 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)
U. S. DEPARTMENT OF LABOR
No. 60544
No Head Tax Due IMMIGRATION SERVICE
Port of San Juan, P. R.
March 9, 1936
This is to certify that the alien Harry Robertshaw native of England, citizen of Great Britain and of the Eng. race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:
Admitted at San Juan, P. R., Dec. 13, 1933, ex S. S. Blue 48-11
Status under Immigration Act of 1924 when admitted Permanent
Said alien is about to proceed to England via the seaport of New York and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.
Personal description of alien: Age, 30; Height, 5 9 1/2; Color of hair, Brn.
Color of eyes, Gray
Identifying documents in alien's possession Passport
Signature of alien Harry Robertshaw
Surrendered at San Juan, P. R. to Inspector J. M. ... 3/14, 1936

Note.—Full text of question 10 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization, association and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number 2

S. S. "TRANS-AMERICAN" (American)

sailing from San Juan, Puerto Rico

March 9

1935

, Arriving at Port of

Philadelphia, Pa., March 14

, 1935

No. on List	NAME IN FULL		AGE	Sex	Migration or Service	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	FAMILY NAME	GIVEN NAME						
1	Adams	Ellis B.	78	-	M. S.	Pleasantville, N. J., August 18, 1859		31 S. California St., Atlantic City, N.J.
2	Arroyo	Luis	34	-	M. M.	Pincon, P. R., April 23, 1901		4325 44th St., Long Island City, N.Y.
3	Arroyo	Elizabeth	33	-	F. M.	New York, N. Y., June 24, 1902		do.
4	Arroyo	Gilbert	5	-	M. S.	New York, N. Y., December 30, 1929		do.
5	Atkin	Mary B.	63	-	F. F.	St. Clair, Pa., October 29, 1871		518 Main Ave., W. Knoxville, Tenn.
6	Coburn	James W.	53	-	M. S.	Hartford, Conn., June 21, 1882		169 N. Beacon St., Hartford, Conn.
7	Conlon	Thomas A.	65	-	M. M.	New York, N. Y., February 28, 1870		3421 University Pl., Baltimore, Md.
8	De Clercq	Bertrude T.	52	-	F. S.	Pelleville, Ill., April 16, 1882		123 Lafayette Ave., Brooklyn, N.Y.
9	Detweiler	Charles E.	57	-	M. M.	Polo, Ill., February 15, 1870		420 Riverside Dr., New York, N.Y. Holy Cross Convent, 157 Graham Ave., Brooklyn, N.Y.
10	Harth	Mother Caritas	74	-	F. S.	Brooklyn, N. Y., January 15, 1861		6713 73rd Pl., Brooklyn, N.Y.
11	Harth	Johanna	59	-	F. S.	Brooklyn, N. Y., November 29, 1875		
12	Hernandez	Miguel	55	-	M. M.	Humacao, P. R., July 4, 1879		44 N. Front St., Philadelphia, Pa.
13	Herrstein	Louis	47	-	M. M.	Philadelphia, Pa., March 2, 1887		1212 S. Berks St., Philadelphia, Pa.
14	Holloway	Louise L.	47	-	F. S.	Knoxville, Tenn., September 18, 1887		2895 Kingston Rd., Knoxville, Tenn. Notre Dame Convent, 1324 W. Milwaukee St., Milwaukee, Wis.
15	Klein	Mother Mary J. Baptist	67	-	F. S.	St. Peter, Minn., August 27, 1857		Holy Cross Convent, 157 Graham Ave., Brooklyn, N.Y.
16	Lane	Sister M. Illuminata	58	-	F. S.	Brooklyn, N. Y., November 16, 1876		
17	Lee	Elmore C.	37	-	F. M.	San Francisco, Cal., April 27, 1897		220 W. 42nd St., New York, N.Y.
18	Leff	Myra E.	43	-	M. M.	Knoxville, Tenn., August 10, 1891		2891 Kingston Rd., Knoxville, Tenn.
19	Leff	Myra E.	70	-	F. S.	Knoxville, Tenn., August 10, 1891		do.
20	Leff	Bertrude	34	-	F. S.	Hingham, Mass., March 1, 1891		do.
21	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		495 West 104th St., Brooklyn, N.Y.
22	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
23	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		245 W. 104th St., New York, N.Y.
24	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
25	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
26	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
27	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
28	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
29	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.
30	Leff	Myra E.	43	-	M. M.	New York, N. Y., November 12, 1893		do.

Line Baltimore Harbor
Owners J. M. Smith & Co., Inc.
Local Agents J. M. Smith & Co., Inc.

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.

2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.

3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.

4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number 1

10-07
S. S. "Amer."

W/S. GILFRANK

sailing from

Las Piedras, Venezuela

March, 9th, 1935

19

Arriving at Port of

Philadelphia, March, 16th, 1935

19

No. on List	NAME IN FULL Family Name Given Name	AGE Yrs. Mos.	SEX	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS	ADDRESS IN UNITED STATES
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U.S.P.H. 570334

1	King Edward Brevard	76 11	M	4/29/98 Bridgewater, N.C.		Pearl, Texas
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Lee B. Dolch -
U. S. IMMIGRANT INSPECTOR

John - [unclear]
[unclear]

11-

- IMPORTANT NOTICE.**
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
 2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
 3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
 4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

"Amer." S. S. MARTINIQUE

sailing from Casimiro, Cuba 3/14/35 1935 Arriving at Port of PHILADELPHIA, PA. March 15, 1935
VIA EASTERN PORTS AND JAMAICA, JAMAICA.

No. Line	NAME IN FULL		AGE	SEX	MARRIED or Single	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	Family Name	Given Name						

U.S.P. #54470

1	Doyle	William	45	7	3	Mar. 15, 1889	Scranton, Pa.	Lumberville, Pa. The Mills, Scranton, Pa.
2	Hall	Benise V.	30	2	3	Jan. 6, 1906	New York, N.Y.	162-03 89th Ave. Jamaica, L.I. N.Y.

Lee B. Dolch
U.S. IMMIGRANT INSPECTOR

M. L. Carter
Master

12-

Line COLUMBIAN STEAMSHIP CO. INC.
Owners DO DO 17 East 17th St.
Local Agents Standard Fruit & Ice Co. Inc.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

W-10-10-1

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

"Amer."

S. S. *Delfina*

sailing from *Humacao, Puerto Rico* March 13, 1935, Arriving at Port of *Philadelphia, Pa.* March 20, 1935

NAME		AGE	SEX	IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS	ADDRESS IN UNITED STATES
1	Ayala	Antonio	22	5 m s	Yabucoa, Puerto Rico. Oct. 3, 1912	None.
2					admitted: MAR 20 1935	
3					Lee B. Dolch -	
4					U. S. IMMIGRANT INSPECTOR	
5					See File #4399/46	
6						
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- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
 2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
 3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
 4. List on this form only United States citizens or citizens of an insular possession of the United States.

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

See
U. S. "GULFBIRD"

sailing from **Las Piedras, Venezuela**, **March 17**, **1935**, Arriving at Port of **Philadelphia, Pa.** **March 24**, **1935**

No. of List	NAME IN FULL		AGE	Sex	MARRIED OR SINGLE	IF NATIVE OF UNITED STATES (INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)	IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS	ADDRESS IN UNITED STATES
	FAMILY NAME	GIVEN NAME						
1	Duensing	Edward Lewis	32	M. M.		Norman, Okla. 7-8-1902		Mission, Texas
2	Duensing	Mary Frances	27	P. M.		Odem, Texas 9-29-1907		Odem, Texas
3	Fuqua	Roy Burns	52	M. M.		Van Alstyle, Texas 2-10-1883		Odem, Texas
4	Fuqua	Carrie Ball	26	P. M.		Odem, Texas 12-13-1908		Odem, Texas
5	Fuqua	Mary Alice	9	P. S.		Tampico, Mexico 10-12-1925		Odem, Texas
6	Fuqua	Polly Dawn	8	P. S.		Tampico, Mexico 2-14-1927		Odem, Texas
7	Fuqua	Billie Joyce	3	P. S.		Brownwood, Texas 8-15-1932		Odem, Texas
8	Arrived at Philadelphia 3/24/35							
9	George J. Haines							
10	U. S. Immigrant Inspector.							
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Line
Owners
Local Agents

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



AFFIDAVIT OF SURGEON

I, _____, Surgeon of the _____, do
 solemnly, sincerely, and truly _____ that I have had _____
 and Surgeon, and that I am entitled to practice as such by and under the authority of _____
 _____, and that I have made a personal examination of _____
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, _____
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical
 condition of such aliens.

E. J. [Signature]

Sworn to _____ this _____ day of _____, 19____
 at _____



SECRETARÍA
 DE
 GOBERNACIÓN
 AGENCIA DE MIGRACION
 EN
 OREGÓN, TEX.

[Signature]

Notary Public for the State of Oregon, and for the County of _____, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in my records.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood will be the basis of the classification, the mother tongue to be used only to confirm and determine the original stock.

African Black.	Geel.	Romanian.
Armenian.	Hebrew.	Russian.
Belgian.	Hervarianian.	Ruthenian-Russians.
Bosnian.	Irish.	Scandinavian-Norwegian, Danish, and Swedish.
Bulgarian.	Italian (North).	Scottish.
Chinese.	Italian (South).	Serbian.
Croatian.	Jamaican.	Slovak.
Cuban.	Korean.	Slovenian.
Dalmatian.	Lithuanian.	Spanish.
Dutch.	Malay.	Spanish-American.
East Indian.	Mexican.	Serian.
English.	Montenegrin.	Turkish.
Finnish.	Moravian.	Welsh.
French.	Pacific Islander.	West Indian (other than Cuban).
French.	Polish.	
German.	Portuguese.	

List

LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall file this (pink) sheet at the time of arrival.

3163

Hond
S. S.

Passengers sailing from

19

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
No. on List	HEAD TAX STATUS	NAME IN FULL Family name Given name	Age Yrs. Mos.	Sex	Married or single	Calling or occupation	Able to Read Read what language or if exemption claimed, on what ground	Nationality (Country of which citizen or subject)	Race or people	Place of birth Country City or town	Immigration Visa Number	Issued at	Date	Remarks
1		Anna Hedwig									Transit Cert. #10	American Consulate Tina Cruz, Mexico	March 15, 1911	
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L. B. Dolch
U. S. IMMIGRANT INSPECTOR

4- Bee # 266846
Jctd 7121

Local agents
Standard Fruit Co.,
Pier 5 North
Philadelphia, Pa.

Total passengers 3
U. S. citizens 2
Aliens 1

* Passenger manifest must be filed with the manifest of the vessel, and must be retained for a period of three years.
* This form is to be used only for the purpose of filing a manifest of passengers.

List

States, or a part of another national possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

~~~~~ P. L. BELFANT, Jr.

LS-H

, 19







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Hand  
S. S.

Y 350

Sailing from Air Obregon, Mexico, March 19, 19 35, Arriving at Port of Philadelphia, Pa., March 20, 19 35

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | REMARKS |
|-------------------|--------------|------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                                                                                                                                          |                                                                                                             |         |
| 1                 | Ernest       | Ernest     | 24  | M   | Lincoln, Neb. Oct. 13th 1910                                                                                                             |                                                                                                             |         |
| 2                 | Eleanor      | Eleanor    | 22  | F   | St. Paul, Minn. Sept. 18th 1912                                                                                                          |                                                                                                             |         |
| 3                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 4                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 5                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 6                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 7                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 8                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 9                 |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 10                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 11                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 12                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 13                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 14                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 15                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 16                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 17                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 18                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 19                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 20                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 21                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 22                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 23                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 24                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 25                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 26                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 27                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 28                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 29                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |
| 30                |              |            |     |     |                                                                                                                                          |                                                                                                             |         |

Lee D. Dolch  
U. S. DEPARTMENT OF LABOR

-16-

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# LIST OR MANIFEST OF ALIENS EMPLOYED ON THE VESSEL AS MEMBERS OF CREW

Required under Act of Congress of February 5, 1917, to be delivered to the United States immigration officer by the representatives of any vessel having such aliens on board upon arrival at a port of the United States.

Vessel *15* *1-10-10* arriving at *Philadelphia* *19* *10* from the port of *10*

| 1                                                    | 2          | 3                                            | 4                                    | 5                               | 6                  | 7                                                             | 8                          | 9   | 10  | 11      | 12          | 13     | 14     | 15                                           |
|------------------------------------------------------|------------|----------------------------------------------|--------------------------------------|---------------------------------|--------------------|---------------------------------------------------------------|----------------------------|-----|-----|---------|-------------|--------|--------|----------------------------------------------|
| NAME IN FULL                                         |            | No. of<br>seaman's<br>identification<br>card | Length<br>of<br>service<br>at<br>sea | Position in ship's com-<br>pany | SHIPPED OR ENGAGED | Whether to be paid<br>if not discharged at<br>port of arrival | Whether<br>able to<br>read | Age | Sex | Race    | Nationality | Height | Weight | Physical mark,<br>scars, etc., or<br>disease |
| Family name                                          | Given name |                                              |                                      |                                 | When               | Where                                                         |                            |     |     |         |             |        |        |                                              |
| TACONIS WILCOX NICKLAS                               |            |                                              |                                      | SEAMAN                          | 10/15/45           | 10/15/45                                                      | Y                          | 21  | M   | Latvian | Latvian     | 5' 6"  | 145    | 1                                            |
| Alien escaped from vessel at Philadelphia Apr. 1935. |            |                                              |                                      |                                 |                    |                                                               |                            |     |     |         |             |        |        |                                              |
| See file 100264                                      |            |                                              |                                      |                                 |                    |                                                               |                            |     |     |         |             |        |        |                                              |
| 10/15/45                                             |            |                                              |                                      |                                 |                    |                                                               |                            |     |     |         |             |        |        |                                              |
| George J. Hanne                                      |            |                                              |                                      |                                 |                    |                                                               |                            |     |     |         |             |        |        |                                              |
| Inspector                                            |            |                                              |                                      |                                 |                    |                                                               |                            |     |     |         |             |        |        |                                              |



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

that the foregoing is a full and true list of all the crew brought in said vessel from any port or place during her present voyage. I have added the copy of section 26 of the United States Immigration Law and of subdivisions 3 (a) and (b) of Executive Order 10198 which appear below.

IMPORTANT NOTICE TO MASTER

The list described below shall be prepared and made available to the immigration inspector boarding the vessel at the port of arrival, and shall in no instance be taken from the vessel. The list of names of other members of a crew, if any, shall also be retained on board, but shall not be given by the master to a principal immigration officer at the port.

EXTRACT FROM ACT OF CONGRESS OF FEBRUARY 5, 1917

Section 1. That upon arrival of any vessel in the United States from any foreign port or place it shall be the duty of the commanding officer of such vessel to deliver to the personnel immigration officers in charge of the port of arrival lists containing the names of all persons employed on such vessel, stating the position they respectively hold in the ship's company, when and where these vessels respectively shipped or engaged, and specifying those to be paid off and discharged in the port of arrival, or lists containing so much of such information as the Secretary of Labor shall by regulations prescribe; and after the arrival of any such vessel it shall be the duty of such commanding officer, whenever so ordered to report to such immigration officer in writing, or upon discovery of all cases in which any such alien has illegally landed to such vessel, or upon receipt of information of such alien together with such information likely to lead to his apprehension, and before his departure of any such vessel it shall be the duty of such commanding officer, whenever so ordered to deliver to such immigration officer a further list containing the names of all non-reporting aliens, the date and place of their arrival at the port of arrival but who will have not returned at the time of last departure, and also the names of those persons who have been paid off and discharged, and of those, if any, who have deserted or landed, and in case of the failure of such commanding officer or master so to deliver either a list, or full account upon arrival and departure respectively, or so to report such cases, the system of immigration and naturalization service of master shall if required by the Secretary of Labor, prior to the sailing of such vessel, be taken under direct control to which the port of arrival is attached the sum of one thousand dollars as a guarantee, which sum shall be forfeited or paid in full and as to such report, and no such vessel shall be granted clearance pending the determination of the time period of the liability for the payment of such fine, and in the event when no fine is levied, the same amount shall such time be granted as is provided by Section 1. That clearance may be granted prior to the determination of such forfeiture upon deposit of such sum, after the determination of such time.

EXTRACT FROM SUBDIVISION 3, RULE 10

At the same time, the department's *workways* (a term that is also used by the department in reference to its training materials) are a "workway" in that they are intended to guide upon the way to go.

3. Clearance should be maintained on record until the bills required by section 26 have been furnished, and not then this— in case of delinquency to the administrative, the prescribed fee and section 26 bills have not been received by section 26 having been served, the deposit specified in Revenue Act of 1926 be made.

## LIST OF RACES OR PEOPLES

|                |                                               |
|----------------|-----------------------------------------------|
| African Black  | Korean                                        |
| Armenian       | Latvian                                       |
| Bahian         | Magyar                                        |
| Bosnian        | Mexican                                       |
| Bulgarian      | Montenegrin                                   |
| Chinese        | Moldavian                                     |
| Croatian       | Pacific Islander                              |
| Cuban          | Polish                                        |
| Dalmatian      | Portuguese                                    |
| Dutch          | Romanian                                      |
| East Indian    | Russian                                       |
| English        | Ruthenian, Pomeran                            |
| French         | Scandinavian, Norwegian,<br>Danish, and Swede |
| Germanic       | Swiss                                         |
| French         | Swedish                                       |
| German         | Swiss                                         |
| Greek          | Swissman                                      |
| Hebrew         | Spanish                                       |
| Herzegovinian  | Swiss, American                               |
| Irish          | Swiss                                         |
| Italian, north | Swiss                                         |
| Italian, south | W. I.                                         |
| Japanese       | West Indian, American                         |



# AFFIDAVIT OF SURGEON

I, Dr. Amador G. Barrios, Surgeon of the Port of San Marcos, Guatemala, do solemnly, sincerely, and truly swear that I have had eleven years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the laws of the Republic of Guatemala, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Signed before me this 24th day of March, 1935  
at San Marcos, Guatemala

Dr. Amador G. Barrios  
Surgeon of the Port of San Marcos

NOTE: - If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigrant inspector at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before this affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Rumanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Serian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

3564

76. S.

"Parlen"

## Passengers sailing from

Pto Barrios , Guatemala

March 25th.

1935

|                            |       |
|----------------------------|-------|
| Total passengers . . . . . | 1,000 |
| U. S. citizens . . . . .   | 1,000 |
| Aliens . . . . .           | 1,000 |

\* Permanent residence within the meaning of this manifest shall be actual residence for one year or more. If not, state will be noted elsewhere in this sheet.



The entries on this sheet must be typewritten or printed.

Arriving at Port of ~~New York Via Charleston~~ Philadelphia

~~April 22~~ *March 21*, 1935

Notes.—Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law or who deliberately is or is opposed to organized government or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member or affiliated with any organization entertaining and teaching the doctrine of opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessary or property of the unlawful assassination or killing of any officer or officers, either (1) specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."

Line  
Owners  
Local Agents



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Gordon E Adams, of the Pan.S/S "Darien", from Pto Barrios Guatemala, do  
(State whether Master, First or Second Officer)  
 solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
 employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
 foregoing Lists or Manifest Sheets, (1) in number, and that from the report of said surgeon and from my own  
 investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
 laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said  
 Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_,  
at \_\_\_\_\_  
\_\_\_\_\_  
Immigrant Inspector.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family head appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 4 (*Age*). The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*sex*) the entry should be either M (male) or F (female).  
 Column 6 (*married or single*). The answer should be M (married), S (single), Wd (widowed), or D (divorced).  
 Column 7 (*calling or occupation*). The entry should describe as accurately as possible the occupation, trade, or profession of each after arrival, as, for example: *self*, engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other inclusive designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifest, and corrections could be made, if necessary, by inspectors during the personal examination of alien passengers.

1. *Column 8. Able to read alone.*—This column is subdivided and contains the following questions: "Read with language for, if exemption is claimed, upon what ground?" "In answering this question the language or dialect the alien is able to read should be stated." If alien is unable to read read claim exemption from the reading requirement, the ground for such exemption should be given.

Column 9: *Namushika*.—Question 9 should be construed to mean the country of which *Namushika* is a citizen or subject.

Column 10 (*Race or people*). See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between laws and the countries of their origin or subject, countries of last permanent residence, and country of birth, and finally under the category reserved for properties in the foreign. For instance, "I have" supporting under the head of country does not mean "I own" by race or people, and, similarly, "I lose" concerning under the head of race or people does not mean "I leave" by country. An Irish, German, or Hebrew given by race must properly come under the heading of Ireland, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

## CIBA

The term "Cuban" refers to the Cuban people (not Negroes)

## WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

## SPANISH AMERICAN

"Spanglish American" refers to the people of Central and South America of Spanish descent.

## ALLEN, J. N. (1974)

"African (Black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

## ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (northern)". Most of these people speak a Gallic dialect of the Falcian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*). Prefix serial number of document with abbreviation "QIV," "NQIV," "FV," or "RF," as appropriate, to designate whether it is quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1921 involved, as Section 4(a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Verifications of landings, etc.*)—Steamship lines should make no entries in this column. The space is for use of Government officials only.

(Column 15 (*Last permanent residence*). Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided

country of permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 12 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that stemship copies accurately show country of last permanent residence independent of country of temporary residence, country of last

Country of last permanent residence of aliens who are permanent residents of the United States and are not citizens of the United States.

Column 17 (Name and complete address of nearest relative or friend in country where alien came). This column should give name, address, telephone number, and date of birth of nearest relative or friend in country where alien came.

*whence alien came.* The entry should give name, exact relationship and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which alien is subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (*First destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year, but constituting permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

(Column 19) *Whether having a ticket to such final destination(s)* - The answer should be either Yes (ticket) or No (no ticket).

(Column 20 (*By whom was passage paid*)). The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative, friend, Steamship company, etc.

Column 2: *Whether in possession of \$10, and if less how much*. The number should give in each case (individual or family) the exact amount of money above. Money brought by the head of a family should not be divided among the several members of the family.

(Column 22 (*Whether ever before in the United States; and if so, when, the date of last departure*). The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as 1844 (1847, Philadelphia). Where in the United States, as the

Philadelphia. Where in the United States more than once previously, individuals had died of a, and give exact or approximate date of last December. From the United States.

Company 25. *Wherein given to some relative or friend.* The answer is: I am a, with the going to join either a relative or friend, with name and approximate date, and if a relative, the exact relationship.

Columns 24 to 36. These questions are self-explanatory and the answers, like all others on the sheet, are subject to review by inspection officers at the next meeting of alms. However, in answering question 30, if alms has been calculated and reported within one year, and in answering 31, if alms has been ordered deposited in a bank,

at any time, authority in the Secretary of Labor to testify for or against any person.



## AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_ , and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this ..... day of ..... 19.....  
at .....

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed and sworn to by the surgeon, in the presence of at least two other persons, one of whom shall be a member of the medical staff of the vessel, and shall be signed by the surgeon and the two witnesses, and shall be filed in the medical record of the vessel.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Romanian.                                        |
| Armenian.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Hercegovinian.    | Ruthenian (Russiak).                             |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes.) |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3564

S. "Darien"

Passengers sailing from Pto Barrios, Guatemala

March 25th.

1935

| 1           | 2                                                                                  | 3            | 4          | 5    | 6    | 7   | 8                 | 9                     | 10      | 11                                                           | 12      | 13                                                | 14             | 15                                                                                                                                                        |              |                                           |                                                                                                                         |                           |      |
|-------------|------------------------------------------------------------------------------------|--------------|------------|------|------|-----|-------------------|-----------------------|---------|--------------------------------------------------------------|---------|---------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------------|------|
| No. on List | HEAD-TAX STATUS<br><small>This column for use of Government officials only</small> | NAME IN FULL |            | Age  |      | Sex | Married or single | Calling or occupation | Able to |                                                              |         | Place of birth                                    |                | Immigration Visa, Passport Visa, or Reentry Permit number<br><br><small>Prefix number with QIV, PQIV, PV, or RP and give section of act involved.</small> | Issued       |                                           | Data concerning verifications of landings, etc.<br><br><small>This column for use of Government officials only.</small> | *Last permanent residence |      |
|             |                                                                                    | Family name  | Given name | Yrs. | Mos. |     |                   |                       | Read    | Read what language (or if exemption claimed, on what ground) | Write   | Nationality (Country of which citizen or subject) | Race or people |                                                                                                                                                           | Country      | City or town, State, Province or District |                                                                                                                         | Place                     | Date |
| 1           | See list ✓                                                                         | Ellis        | John H     | 30   | 10   | M   | S                 | Bank Employee         | Y       | British                                                      | English | England                                           | Luton          | Service #13                                                                                                                                               | San Salvador | 3/20/35                                   |                                                                                                                         | San Salvador              |      |
| 2           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 3           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 4           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 5           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 6           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 7           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 8           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 9           |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 10          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 11          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 12          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 13          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 14          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 15          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 16          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 17          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 18          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 19          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 20          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 21          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 22          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 23          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 24          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 25          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 26          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 27          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 28          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 29          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |
| 30          |                                                                                    |              |            |      |      |     |                   |                       |         |                                                              |         |                                                   |                |                                                                                                                                                           |              |                                           |                                                                                                                         |                           |      |

Head Tax Paid 2.00  
later April 5, 1935  
W24

Total passengers . . . .  
U. S. citizens . . . .  
Aliens . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of names will be found on the back of this sheet.



# STATES IMMIGRANT INSPECTOR AT PORT OF ARRIVAL

List

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigrant inspector  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of Philadelphia Pa., March 31st., 1935

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>*Intended future permanent residence</small> | By whom was passage paid? | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of a political party or organization, or entertains and teaching directed in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the necessity or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Whether excluded and deported within one year | Whether arrested and deported at any time | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of<br>Complexion<br>Hair<br>Eyes | Marks of identification |      |      |      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------|-------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|----------------------------------------|-------------------------|------|------|------|
| 1           | Rev. H. Ellis St. Mary<br>Magdalena Vic.<br>Norwich England                                                                                                | England                                                                  | My Self                   | Yes                                                   | 1930                                                                 | Fried Mrs Colclough<br>273 N. 9th. St. Newark N.J.                                                               | Days                               | No                   | No                   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | No                                            | No                                        | No                                       | Good                                                    | No                       | 5                                      | Fair                    | Fair | Blue | None |
| 2           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 3           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 4           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 5           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 6           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 7           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 8           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 9           |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 10          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 11          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 12          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 13          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 14          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 15          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 16          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 17          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 18          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 19          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 20          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 21          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 22          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 23          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 24          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 25          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 26          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 27          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 28          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 29          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 30          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 31          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 32          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 33          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 34          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 35          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 36          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |
| 37          |                                                                                                                                                            |                                                                          |                           |                                                       |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                           |                                          |                                                         |                          |                                        |                         |      |      |      |

Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of a political party or organization, or entertains and teaching directed in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the necessity or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

Line  
Owners  
Local Agents



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Gordon E. Adams, of the Pan-S/S "Darlen", from Pto Barrios, Guatemala, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Master OFFICER

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_  
Immigrant Inspector.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (Age).—The answer in this column should be expressed in years or months the latter applying only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M (male) or F (female).

Column 5 (Married or single).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 6 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example, civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel painter, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of each alien.

Column 8 (Able to read and write).—This column is subdivided and headed as follows: "Read" and "Write." "Read" should be marked "Yes" or "No" or "Can't read." In answering this question, the language on which the alien is able to read should be stated. If alien is unable to read, state "Can't read." If alien is unable to read, the ground for such exemption should be given.

Column 9 (Ancestry).—Question 9 should be answered to mean the country of birth, nationality, or race.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race of people as given in said list.

Special attention should be paid to the distinction between race and the category of which alien is subject, country of last permanent residence, and country of birth, and manifests should be carefully reviewed by inspectors in this regard. "Race" is a term of relationship under the head of country does not mean "People," and, similarly, "People" appearing under the head of race of people does not mean "People" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of English, Scottish, or any other country. In this connection the following distinctions should be especially observed:

CUBAN  
The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other island of the West Indies, North or South America, Europe or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i.e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i.e., compartments of Liguria, Toscana, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NIV," "IV," or "RP" as appropriate, to designate whether it is quota Immigration Visa, Nonquota Immigration Visa, Passenger Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1924 involved, as Section 1 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Certifications of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entry in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies ascertain state, country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as United States.

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative of friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town, of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, its self, husband, father, brother, or other relative, friend, steamship company, etc.

Column 21 (Whether in possession of \$20, and if less how much).—The answer should give in each case (individual or family) the exact amount of money, shares, money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States and, if so, when, where, and date of last departure).—The entries should show whether or not Yes or No to the United States before; and if so, the year (or period of years) and place (e.g., New York, Philadelphia). Where in the United States more than once previously, indicate last and date of departure, and show date of approximate date of last departure from the United States.

Column 23 (If female, giving her name, relation to head of household, and whether going to join father, husband, or friend, with name and last date of departure, and if a relative, the exact relationship).

Columns 24 to 26.—These questions are self-explanatory and the answers shall all others on this sheet, and subject to review by inspectors, officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year, and is answering "I," alien has been ordered deported and is present at same time, authority in the Secretary of Labor to receive for admission should be shown.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Line* **S. S. "Darien"** sailing from Pto ~~Barrios~~ Barrios, Guatemala Mar. 25th, 19 35, Arriving at Port of Philadelphia Pa. ~~March 31st.~~ **March 31st.** ~~1935~~ **1935**

| No.<br>ON<br>LIST | NAME IN FULL |            | AGE  |      | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES        |
|-------------------|--------------|------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 1                 | Jacobson     | Helen      | 48   |      | F   | M                    | <i>11 May 1886 - 1911</i>                                                                                                                | U.S. District Court, San Francisco Cal.<br>August 1st. 1927 ✓                                               | 542 W. 112 St. New York ✓       |
| 2                 | Farwell      | Mildred    | 44   |      | F   | M                    | June 18th. 1890. Port Omaha, Nebraska,<br>November 10th. 1879. Boston Mass.                                                              | <i>11 May 1911</i>                                                                                          | Syoset, Long Island, New York ✓ |
| 3                 | Coolidge     | Edith      | 55   |      | F   | W                    | <del>XXXXXXXXXXXXXXXXXXXX</del> ✓                                                                                                        |                                                                                                             | 101 Chestnut St. Boston Mass. ✓ |
| 4                 | Lawrence     | John S     | 56   |      | M   | M                    | September 6th. 1878 Nahant Mass. ✓                                                                                                       |                                                                                                             | Topsfield, Mass. ✓              |
| 5                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 6                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 7                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 8                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 9                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 10                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 11                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 12                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 13                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 14                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 15                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 16                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 17                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 18                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 19                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 20                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 21                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 22                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 23                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 24                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 25                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 26                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 27                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 28                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 29                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |
| 30                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                 |

- 20 -

Line  
Owners United Fruit  
Balboa Shipping Co Inc.  
Local Agents

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
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3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number *4*

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*B.S.* "Darion" sailing from Pto Barrios, Guatemala, March 25<sup>th</sup>, 1935, Arriving at Port of New York ~~Philadelphia~~ April 29 35

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES          |
|-------------------|--------------|------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 1                 | Cooke        | Harris Lee | 63  | M   | M                    | Jan. 5th. 1872, Saratoga Springs New York                                                                                               |                                                                                                              | 14, Chestnut St. Cooperstown N.Y. |
| 2                 | Cooke        | Emily P.   | 63  | F   | M                    | Mar. 3rd. 1872 Goshen New York.                                                                                                         |                                                                                                              | " "                               |
| 3                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 4                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 5                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 6                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 7                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 8                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 9                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 10                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 11                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 12                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 13                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 14                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 15                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 16                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 17                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 18                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 19                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 20                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 21                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 22                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 23                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 24                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 25                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 26                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 27                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 28                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 29                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |
| 30                |              |            |     |     |                      |                                                                                                                                         |                                                                                                              |                                   |

Line United Fruit  
Owners Balboa Shipping Co., Inc.  
Local Agents

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4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARBARA" (American)

sailing from San Juan, Puerto Rico

March 30

, 1935, Arriving at Port of Philadelphia, Pa., April 4

, 1935

| No.<br>on<br>List | NAME IN FULL          |                       | AGE | Sex | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                   |
|-------------------|-----------------------|-----------------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|                   | Family Name           | Given Name            |     |     |                      |                                                                                                                                         |                                                                                                             |                                            |
| 1                 | Bowman                | Frank Edwin           | 25  | -   | M.                   | S. Remington, Va., June 24, 1909                                                                                                        |                                                                                                             | Yorkshire House, Warrenton, Va.            |
| 2                 | Cowles                | Emma J.               | 47  | -   | F.                   | M. Baxter Springs, Kan., September 14, 1887                                                                                             |                                                                                                             | 16 Green St., Ipswich, Mass.               |
| 3                 | Cowles                | John C.               | 11  | P   | M.                   | S. Mayaguez, P. R., November 8, 1923                                                                                                    |                                                                                                             | do.                                        |
| 4                 | Dastas                | Emilia                | 26  | -   | F.                   | S. Yauco, P. R., March 10, 1909                                                                                                         |                                                                                                             | Woodstown, N. J.                           |
| 5                 | Flitcraft             | Anne                  | 79  | -   | F.                   | W. Sharptown, N. J., October 1, 1855                                                                                                    |                                                                                                             | do.                                        |
| 6                 | Houck                 | Kathryn               | 20  | -   | F.                   | S. San Juan, P. R., August 21, 1914                                                                                                     |                                                                                                             | 207 Mt. Prospect Ave., Newark, N. J.       |
| 7                 | Johnson               | Albin                 | 48  | -   | M.                   | M. Kittery, Me., March 18, 1886                                                                                                         |                                                                                                             | El Paso, Tex.                              |
| 8                 | Johnson               | Louise                | 9   | -   | F.                   | S. Alicante, Spain, December 8, 1925                                                                                                    | Father American Citizen (U.S. Vice-Consul)                                                                  | do.                                        |
| 9                 | Johnson               | Clotilde              | 5   | -   | F.                   | S. Santo Domingo, Rep. Dominicana, June 16, 1930                                                                                        | do. ( do. )                                                                                                 | do.                                        |
| 10                | Konchar               | Vida                  | 21  | -   | F.                   | M. Forest City, Pa., June 15, 1914                                                                                                      |                                                                                                             | Forest City, Pa.                           |
| 11                | Konchar               | Nicholas              | 5   | -   | M.                   | S. Santo Domingo, Rep. Dominicana, October 31, 1934                                                                                     | Father American Citizen                                                                                     | do.                                        |
| 12                | Laguna                | Alfonso               | 50  | -   | F.                   | S. Santurce, P. R., January 9, 1875                                                                                                     |                                                                                                             | 3732 N. Bouvier St., Philadelphia, Pa.     |
| 13                | Long                  | Frank                 | 37  | -   | M.                   | S. Cork, Ireland, August 24, 1898                                                                                                       | Co. Court, Youngstown, O., 2/9/12, on fathers papers                                                        | 2347 Goleta Ave., Youngstown, O.           |
| 14                | Lopes                 | Cesar                 | 18  | A   | M.                   | S. Humacao, P. R., April 18, 1917                                                                                                       |                                                                                                             | C/O American Red Cross, Washington, D. C.  |
| 15                | Maldonado, Jimenez de | Isabel                | 29  | -   | F.                   | M. Comerio, P. R., May 6, 1906                                                                                                          |                                                                                                             | 614 W. 136th St., Apt. 42, New York, N. Y. |
| 16                | Maldonado Jimenez     | Teofilo               | 7   | -   | M.                   | S. Santurce, P. R., October 26, 1927                                                                                                    |                                                                                                             | do.                                        |
| 17                | Maldonado Jimenez     | Carmen Beatris        | 5   | -   | F.                   | S. Santurce, P. R., December 15, 1929                                                                                                   |                                                                                                             | do.                                        |
| 18                | Marques               | Maria C. L. Vda. de   | 77  | -   | F.                   | W. Fajardo, P. R., May 3, 1857                                                                                                          |                                                                                                             | 3732 N. Bouvier St., Philadelphia, Pa.     |
| 19                | Marques               | Petra                 | 40  | -   | F.                   | S. Vieques, P. R., January 18, 1895                                                                                                     |                                                                                                             | do.                                        |
| 20                | Milton King           | Lee                   | 21  | -   | F.                   | M. Acme, W. Va., October 21, 1913                                                                                                       |                                                                                                             | Acme, W. Va.                               |
| 21                | Milton King           | Kermit                | 2   | -   | M.                   | S. New York, N. Y., April 2, 1933                                                                                                       |                                                                                                             | do.                                        |
| 22                | Oleh                  | Dorothy               | 38  | -   | F.                   | M. Washington, D. C., June 5, 1897                                                                                                      |                                                                                                             | 7461 Bland Dr., Clayton, Mo.               |
| 23                | Oleh                  | David                 | 7   | -   | M.                   | S. St. Louis, Mo., July 10, 1927                                                                                                        |                                                                                                             | do.                                        |
| 24                | Roger                 | Carmen Julia          | 19  | -   | F.                   | S. Mayaguez, P. R., January 31, 1916                                                                                                    |                                                                                                             | 3732 N. Bouvier St., Philadelphia, Pa.     |
| 25                | Schnebly              | Keith                 | 33  | -   | M.                   | M. Kansas City, Mo., October 20, 1901                                                                                                   |                                                                                                             | 369 Upland Way, Drexel Hill, Pa.           |
| 26                | Schnebly              | Virginia              | 30  | -   | F.                   | W. Philadelphia, Pa., June 30, 1904                                                                                                     |                                                                                                             | do.                                        |
| 27                | Schulze               | Augusto               | 29  | -   | M.                   | M. Aguadilla, P. R., November 12, 1904                                                                                                  |                                                                                                             | 2076 8th Ave., New York, N. Y.             |
| 28                | Schulze               | Ana Angelica          | 20  | -   | F.                   | M. Corozal, P. R., May 8, 1925                                                                                                          |                                                                                                             | do.                                        |
| 29                | Skovira               | Sister M. Scholastica | 45  | -   | F.                   | S. Javorina, Austria, April 3, 1890                                                                                                     | On father's papers<br>Court Common Pleas, Greenburg, Pa., 8/29/03                                           | Mission Helpers' Convent, Towson, Md.      |
| 30                | Still                 | Shirley E.            | 52  | -   | M.                   | M. Greenwood, S. C., April 28, 1882                                                                                                     |                                                                                                             | 436 High St., Portsmouth, Va.              |

At Philadelphia April 1, 1935  
 I, \_\_\_\_\_  
 Master, ss. "BARBARA"  
 Line Baltimore Insular  
 Owners A. H. Bull S/S Co., Inc.  
 Local Agents A. H. Bull & Co., Inc.

Master, ss. "BARBARA"

Line Baltimore Insular

Owners A. H. Bull S/S Co., Inc.

Local Agents A. H. Bull & Co., Inc.

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Number 2

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARBARA" (American) sailing from San Juan, Puerto Rico, March 30, 1935, Arriving at Port of Philadelphia, Pa., April 4, 1935

| No.<br>on<br>List | NAME IN FULL                       |               | AGE  | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-------------------|------------------------------------|---------------|------|-----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                   | FAMILY NAME                        | GIVEN NAME    |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 1                 | Still                              | Mary A.       | ✓ 42 | -   | F. M. Atlanta, Ga., April 12, 1892                                                                                                       |                                                                                                              | 436 High St., Portsmouth, Va.           |
| 2                 | Still                              | Ernest Bryant | ✓ 6  | -   | M. S. Portsmouth, Va., March 9, 1929                                                                                                     |                                                                                                              | do.                                     |
| 3                 | Tore                               | Rafael        | ✓ 57 | -   | M. M. Ponce, P. R., August 13, 1877                                                                                                      |                                                                                                              | 2227 Joseph St., New Orleans, La.       |
| 4                 | Tore                               | Maria         | ✓ 48 | -   | F. M. Coamo, P. R., February 28, 1886                                                                                                    |                                                                                                              | do.                                     |
| 5                 | Warner                             | Eugene P.     | ✓ 30 | -   | M. M. Cleveland, O., July 24, 1905                                                                                                       |                                                                                                              | 4705 45th St., Long Island City, N.Y.   |
| 6                 | Warner                             | Toni          | ✓ 23 | -   | F. M. New York, N. Y., November 18, 1912                                                                                                 |                                                                                                              | do.                                     |
| 7                 | Wooten                             | William P.    | ✓ 62 | -   | M. M. La Grange, N. C., February 14, 1873                                                                                                |                                                                                                              | 2540 Mass. Ave., N.W., Washington, D.C. |
| 8                 | Wright                             | Arthur E.     | ✓ 51 | -   | M. M. Falmouth, Mass., October 13, 1883                                                                                                  |                                                                                                              | 31 Glendale Rd., Sharon, Mass.          |
| 9                 | Yarnall                            | Anna G.       | ✓ 56 | -   | F. M. Seidersville, Md., February 9, 1878                                                                                                |                                                                                                              | 4817 Florence Ave., Philadelphia, Pa.   |
| 10                | Yarnall                            | Margaret H.   | ✓ 24 | -   | F. S. Philadelphia, Pa., August 10, 1910                                                                                                 |                                                                                                              | do.                                     |
| 11                | Admitted at Philadelphia, Pa. 1935 |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 12                | Leona & Marie                      |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 13                | In company with Yarnall            |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 14                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 15                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 16                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 17                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 18                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 19                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 20                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 21                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 22                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 23                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 24                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 25                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 26                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 27                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 28                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 29                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |
| 30                |                                    |               |      |     |                                                                                                                                          |                                                                                                              |                                         |

Master, ss. "BARBARA"

25

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

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### AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_ years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at

<sup>1</sup> Some — if a person deals with the result of a fall or a dislocation of a limb or a fractured bone of the arm or leg — after a period of artificial and very dangerous treatment may have occurred no more in this category of cases of "concomitant" and "secondary" and no accident is to be reported.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Romanian.                                        |
| American.        | Hebrew.           | Russian.                                         |
| Babonian.        | Herzoginian.      | Ruthenian (Rusynian).                            |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |







0 W T 20 8 A F T Y

The entries on this sheet must be typewritten or printed.

## Arriving at Port of

### Arriving at Port of

Philadelphia, Pa.

April 1, 1935.

, 19

27[illegible]



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_

Officer.

Immigration Officer.

14-430

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*U.S. Statute*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The age in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be "M" (male) or "F" (female). Column 6 (*Married or Single*).—The answer should be "M" (married), "S" (single), "W" (widow), or "D" (divorced).

Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived in, for example: "Civil engineer," "stationary engineer," "domestic engineer," "shiping engineer," "brass polisher," "steel polisher," "iron molder," "coal burner," etc., and not simply as "engineer," "polisher," "molder," "burner," or other indefinite description.

A distinction should be made between farmers and farm laborers, regardless of the amount of money drawn, as follows:

A farmer is one who owns a farm, either for himself or for others.

A farm laborer is one who works on a farm for the land who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien passengers.

Column 8 (*Language spoken and heard*).—This column is subdivided and contains the following questions: "What language (or, if exemption is claimed, upon what ground)?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Country of birth*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "French" appearing under the head of country does not mean "French" by race or people, but, "French" appearing under the head of race or people does not mean "French" by country. An Irish, German, or Italian alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### HISPANIC AMERICAN

"Hispanic American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, who, coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to that portion of Italy north of the basin of the River Po (i. e., compartments of Liguria, Piedmont, the Marches, Lombardy, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Piedmont, the Marches, Lombardy, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)." Most of these people speak a Gallic dialect of the Italian language.

Column 11 (*Place of birth*).—The State, Province, or District of Birth should be shown in addition to the city or town.

Column 12 (*Serial number of document of production*).—Prefix serial number of document with abbreviation "QIV," "NIV," "PV," or "FIV," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Return Permit; and also state section of the Immigration Act of 1924 involved, as section 1 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Verifications of landing, etc.*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of 1 year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence thereto. The answer in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies recognize permanent or last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of alien who has permanent residence of the United States and has departed from a visit abroad should be marked "United States."

Column 17 (*Name and complete address of nearest relative as shown on evidence when alien came*).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of nearest living relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town or intended future permanent residence, if within the United States; county, if outside the United States, and port of intended departure).

Column 19 (*Whether having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (*Whether in possession of \$20, and if less how much*).—The answer should give in each case (individual or family) the exact amount of money secured. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States, and if so, when, where, and date of last departure*).—The entry should show whether or not the alien has been in the United States before; and if so, the year (or period of years) and place (e. g., New York, Philadelphia). Where in the United States more than once present, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 36.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of alien passengers. In answering question 30, if alien has been arrested and not deported within one year and the Secretary of Labor has authorized him as eligible for admission, the authority for such reclassification should be given.



## AFFIDAVIT OF SURGEON

I, Mariano Cajigas, M. D., Surgeon of the American ss. "BARBARA" sailing therewith, do solemnly, sincerely, and truly swear that I have had four years experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners of Puerto Rico, and that I have made a personal examination of each of the aliens named herein, and that the foregoing List or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

at \_\_\_\_\_

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification; the mother tongue to be used only to assist in determining the original stock.

|                  |                  |                                               |
|------------------|------------------|-----------------------------------------------|
| African-American | Chinese          | Romanian                                      |
| American         | Dutch            | Russian                                       |
| Belgian          | English          | Ruthenian (Rusyn)                             |
| Brazilian        | Finnish          | Scandinavian (Norwegian, Danish, and Swedish) |
| British          | French           | Scottish                                      |
| Canadian         | German           | Serbian                                       |
| Croatian         | Japanese         | Slovak                                        |
| Cuban            | Korean           | Slovenian                                     |
| Czechoslovak     | Lithuanian       | Spanish                                       |
| Danish           | Mazilian         | Spanish-American                              |
| East Indian      | Mexican          | Syrian                                        |
| English          | Montenegrin      | Turkish                                       |
| Finnish          | Metaxian         | Welsh                                         |
| French           | Pacific Islander | West Indian (Antillean)                       |
| German           | Polish           | Yiddish                                       |
| Greek            | Portuguese       |                                               |



List 1

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED STATES

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3566

S. S.

"BARRERA" (American)

Passengers sailing from

San Juan, Puerto Rico

March 30

, 19 36

| 1           | 2                                                                                                                         | 3            | 4              | 5    | 6    | 7   | 8                     | 9       | 10      | 11                                                   | 12             | 13             | 14           | 15                      |                    |                 |                          |              |          |
|-------------|---------------------------------------------------------------------------------------------------------------------------|--------------|----------------|------|------|-----|-----------------------|---------|---------|------------------------------------------------------|----------------|----------------|--------------|-------------------------|--------------------|-----------------|--------------------------|--------------|----------|
| No. on List | HEAD-TAX STATUS<br><small>(Indicate whether the person is an alien or a native-born citizen of the United States)</small> | NAME IN FULL |                | Age  |      | Sex | Calling or occupation | Able to |         | Nationality<br>(Country of which citizen or subject) | Race or people | Place of birth |              | Immigration Visa Number | Issued at          | Date            | Last permanent residence |              |          |
|             |                                                                                                                           | Family name  | Given name     | Yrs. | Mos. |     |                       | Read    | Write   |                                                      |                | Country        | City or town |                         |                    |                 | Country                  | City or town |          |
| 1           |                                                                                                                           | Baird        | James Makinson | 32   | 4    | M.  | M. Merchant           | Yes     | English | Yes                                                  | St. Britain    | Scotch         | Newfoundland | St. John                | Form 546<br>#58838 | San Juan, P. R. | March 30, 1935           | Newfoundland | St. John |
| 2           |                                                                                                                           | Power        | Michel Joseph  | 66   | 3    | M.  | M. Merchant           | Yes     | English | Yes                                                  | St. Britain    | Irish          | Newfoundland | St. John                | #58837             | San Juan, P. R. | March 30, 1935           | Newfoundland | St. John |
| 3           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 4           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 5           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 6           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 7           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 8           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 9           |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 10          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 11          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 12          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 13          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 14          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 15          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 16          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 17          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 18          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 19          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 20          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 21          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 22          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 23          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 24          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 25          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 26          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 27          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 28          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 29          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |
| 30          |                                                                                                                           |              |                |      |      |     |                       |         |         |                                                      |                |                |              |                         |                    |                 |                          |              |          |

Admitted at Philadelphia on presentation of Form 546, April 14, 1936  
Group of 10 persons  
Immigrant Visa

Total passengers . . . 42  
U. S. citizens . . . 40  
Aliens . . . 2

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of the year or more.  
† List of names will be found on the back of this sheet.



The entries on this sheet must be typewritten or printed.

April 4

19-

2011  
Coral & C.  
H. H. Surgeon  
U. S. P. H. S.

Form 546

ALIEN CERTIFICATE—INSULAR TERRITORY

U. S. DEPARTMENT OF LABOR

IMMIGRATION SERVICE

No. 58838

Port of San Francisco 1920

This is to certify that the alien  
native of Italy, citizen of Italy and of  
the Italian race, has been lawfully admitted to the United States for permanent  
residence as shown by records of this office as follows:  
Admitted at San Francisco 3/23, 1920, ex S. S. 102  
Status under Immigration Act of 1924 when admitted  
Sped. alien is about to proceed to Italy via the seaport  
of San Francisco and is entitled to admission at a seaport of continental United  
States upon identification and surrender of this certificate.  
Personal description of alien: Age, 32; Height, 5; Color of hair, black  
Color of eyes, brown  
Identifying documents in alien's possession  
Signature of alien  
Surrendered at \_\_\_\_\_ to Inspector \_\_\_\_\_, 19\_\_\_\_

- 23 -

*Notes.*—Full text of question 23 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



The entries on this sheet must be typewritten or printed.

1935

*[Faint handwritten notes]*

ALBUQUERQUE TERRITORY  
U. S. DEPARTMENT OF THE INTERIOR

ORIGINAL  
No. 8810

Port of \_\_\_\_\_

19\_\_

This is to certify that the alien  
nation of \_\_\_\_\_  
has been lawfully admitted to the United States for permanent residence and his record of this entry is as follows:

Admitted at \_\_\_\_\_, U. S.  
Ships under license No. \_\_\_\_\_ when admitted  
Sailed \_\_\_\_\_ via the steamer \_\_\_\_\_  
\_\_\_\_\_ of \_\_\_\_\_ admission at a port of continental United States in the certificate.

Physical description of person: \_\_\_\_\_ Color of hair, \_\_\_\_\_  
\_\_\_\_\_

Place of birth \_\_\_\_\_ nation's \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Special Director of Immigration







Report on this form United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITIES

Arrived 8.8. Dulway sailing from Los Angeles, Nevada April 8, 1935. Arriving at Port of Philadelphia April 9, 1935

| No.<br>on<br>List | NAME IN FULL  | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF FOREIGN STATE, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NAT. REGISTRATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES         |
|-------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------------------|
| 1                 | ANDERSON HANS | Admitted at Philadelphia 4/9/35<br>George H. Morris<br>Immigrant Inspector                                                               | Not certified 1934, U.S. 11<br>issued at New York City, New York                                               | 746 5/19 St<br>Philadelphia, Pa. |
| 2                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 3                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 4                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 5                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 6                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 7                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 8                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 9                 |               |                                                                                                                                          |                                                                                                                |                                  |
| 10                |               |                                                                                                                                          |                                                                                                                |                                  |
| 11                |               |                                                                                                                                          |                                                                                                                |                                  |
| 12                |               |                                                                                                                                          |                                                                                                                |                                  |
| 13                |               |                                                                                                                                          |                                                                                                                |                                  |
| 14                |               |                                                                                                                                          |                                                                                                                |                                  |
| 15                |               |                                                                                                                                          |                                                                                                                |                                  |
| 16                |               |                                                                                                                                          |                                                                                                                |                                  |
| 17                |               |                                                                                                                                          |                                                                                                                |                                  |
| 18                |               |                                                                                                                                          |                                                                                                                |                                  |
| 19                |               |                                                                                                                                          |                                                                                                                |                                  |
| 20                |               |                                                                                                                                          |                                                                                                                |                                  |
| 21                |               |                                                                                                                                          |                                                                                                                |                                  |
| 22                |               |                                                                                                                                          |                                                                                                                |                                  |
| 23                |               |                                                                                                                                          |                                                                                                                |                                  |
| 24                |               |                                                                                                                                          |                                                                                                                |                                  |
| 25                |               |                                                                                                                                          |                                                                                                                |                                  |
| 26                |               |                                                                                                                                          |                                                                                                                |                                  |
| 27                |               |                                                                                                                                          |                                                                                                                |                                  |
| 28                |               |                                                                                                                                          |                                                                                                                |                                  |
| 29                |               |                                                                                                                                          |                                                                                                                |                                  |
| 30                |               |                                                                                                                                          |                                                                                                                |                                  |

*Ammler  
Inspector*

IMPORTANT NOTICE: 1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_ years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before departure is completed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized local authority.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This pink sheet is for the listing of

3567

Nov. S. S. CHRISTIAN Kroh g.

Passengers sailing from DOMERARA, British Guiana  
via Wilmington, N.C.

Apr 13 - 1935

| No.<br>on<br>List | HEAD-TAX<br>STATUS<br><small>This column<br/>for use of<br/>Government<br/>officials only.</small> | NAME IN FULL                    |            | Age       | Sex               | Calling<br>or<br>occupation | Able to— |                                                                  | Nationality,<br>Country of<br>which citizen<br>or subject | Race or people | Place of birth |                                                 | Immigration Visa,<br>Passport Visa, or<br>Reentry Permit<br>number                 | Issued    |        | Data concerning<br>verifications of<br>landings, etc. | Last permanent residence |                                                 |
|-------------------|----------------------------------------------------------------------------------------------------|---------------------------------|------------|-----------|-------------------|-----------------------------|----------|------------------------------------------------------------------|-----------------------------------------------------------|----------------|----------------|-------------------------------------------------|------------------------------------------------------------------------------------|-----------|--------|-------------------------------------------------------|--------------------------|-------------------------------------------------|
|                   |                                                                                                    | Family name                     | Given name | Yrs. Mos. | Married or single |                             | Read     | Read what language or<br>if exemption claimed,<br>on what ground | Write                                                     |                | Country        | City or town,<br>State, Province<br>or District | Prefix number with<br>QIV, NOIV, PV, or<br>RP and give section<br>of act involved. | Place     | Date   |                                                       | Country                  | City or town,<br>State, Province<br>or District |
| 1                 |                                                                                                    | NILSEN                          | GUNNAR     | 22        | M                 | S. Seaman                   | yes      | English                                                          | yes                                                       | Norway         | Norway         | Tromsø                                          | 2291                                                                               | VENEZUELA | 4/1/35 |                                                       | Norway                   | Tromsø                                          |
| 2                 |                                                                                                    | admitted at Philadelphia Office |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 3                 |                                                                                                    | April 15, 1935.                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 4                 |                                                                                                    | Louis P. Miller                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 5                 |                                                                                                    | J. S. IMMIGRANT INSPECTOR       |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 6                 |                                                                                                    | J.C. Rogers, Agents             |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 7                 |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 8                 |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 9                 |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 10                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 11                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 12                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 13                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 14                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 15                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 16                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 17                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 18                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 19                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 20                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 21                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 22                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 23                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 24                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 25                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 26                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 27                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 28                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 29                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |
| 30                |                                                                                                    |                                 |            |           |                   |                             |          |                                                                  |                                                           |                |                |                                                 |                                                                                    |           |        |                                                       |                          |                                                 |

Total passengers . . . . .

U. S. citizens . . . . .

Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.

† List of races will be found on the back of this sheet.

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## List

The entries on this sheet must be typewritten or printed.

, Apr, 13 -

, 1935-

No. 1 No. 2 No. 3 No. 4 No. 5 No. 6 No. 7 No. 8 No. 9 No. 10 No. 11 No. 12 No. 13 No. 14 No. 15 No. 16 No. 17 No. 18 No. 19 No. 20 No. 21 No. 22 No. 23 No. 24 No. 25 No. 26 No. 27 No. 28 No. 29 No. 30 No. 31 No. 32 No. 33 No. 34 No. 35 No. 36 No. 37 No. 38 No. 39 No. 40 No. 41 No. 42 No. 43 No. 44 No. 45 No. 46 No. 47 No. 48 No. 49 No. 50 No. 51 No. 52 No. 53 No. 54 No. 55 No. 56 No. 57 No. 58 No. 59 No. 60 No. 61 No. 62 No. 63 No. 64 No. 65 No. 66 No. 67 No. 68 No. 69 No. 70 No. 71 No. 72 No. 73 No. 74 No. 75 No. 76 No. 77 No. 78 No. 79 No. 80 No. 81 No. 82 No. 83 No. 84 No. 85 No. 86 No. 87 No. 88 No. 89 No. 90 No. 91 No. 92 No. 93 No. 94 No. 95 No. 96 No. 97 No. 98 No. 99 No. 100

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# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest and verified by the affidavit. If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before a consular officer or authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |







## STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

Arriving at Port of Philadelphia, Pa.

April 20, 1935:—

| No.<br>on<br>List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(*Intended future permanent residence)</small> |                                                            | By whom was passage paid?                                                                                                                                    | Whether ever before in the United States, and if so, when and where?<br><small>(Last residence only.)</small> | Purpose of coming to United States                                | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Whether a polygamist                                              | Whether an anarchist                                              | Condition of health, mental and physical                          | Deformed or crippled. Nature, length of time, and cause           | Height<br>Feet Inches                                             | Color of<br>Hair Eyes                                             | Marks of identification                                           |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|
|                   |                                                                                                                                                            | In U. S. A., its territories or possessions                                | Foreign country via (port of departure) State City or town | Whether alien paid his own passage, whether paid by relative, whether paid by any other person, or by any corporation, society, municipality, or government? | Yes or No Year or period of years Where? Date of last departure                                               | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States                                                | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States | Whether alien intended to remain permanently in the United States |
| 1                 | Brother - Francisco Soria,<br>Oliva, Spain                                                                                                                 | N.Y.                                                                       | New York no                                                | self yes                                                                                                                                                     | yes 22 California -<br>New York -                                                                             | Wife Mrs. Lillian<br>Soria - 701-W. 177 St.<br>New York, N.Y.     | no                                                                                                               | no                                                                | no                                                                | no                                                                | no                                                                | good                                                              | no                                                                | 5 3 fair grey blue None                                           |

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**Name:** Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or subverts or attempts to subvert organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of, affiliated with, or an organization, or membership and teaching in either in or opposition to organized government, or who teaches the unlawful destruction of property, or who advocates or teaches the data, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."



## List

The entries on this sheet must be typewritten or printed.

April 20, \_\_\_\_\_, 1935:—

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<sup>1</sup> Note: Full text of question 98 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disseminates or impugns the government, or who advocates the assassination of public officials or who advocates or teaches the unlawful destruction of property, or is a member of, affiliated with, or conspires with, or teaches or is a member of a club, society, or organization, or teaches or is a member of a club, society, or organization, or teaches the duty, necessity, or propriety of the unlawful assault or killing of any other or others, either of specific individuals and officers generally, of the Government of the United States or of any other organized government because of laws their official character."



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Vicente Aldaco-Mateu, of the Span. S.S. Aldaco, from Valencia, Spain - do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing thereunto, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifests. In further and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration; and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Vicente Aldaco

Officer.

Sworn to before me this 20<sup>th</sup> day of April, 1935

at Philadelphia, Pa.

Lee D. Dolch  
Immigration Officer.

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## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, according to separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1917, and also according to separate manifests for aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of the Immigration Service, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet, even if they are in the same class; and if they travel in different classes, appropriate cross references should be made on the lists on which the respective names are listed.

Column 2 (Head line).—Should be the name of the vessel, as it appears on the manifest, and the name of the master or commanding officer.

Column 3 (Class).—The names in this column should be expressed in years or months, the latter applying only to those under 16 years of age.

Column 4 (Sex).—The names should be given as M (male) or F (female).

Column 5 (Country of birth).—The names should be given as (1) American, (2) Canadian, (3) British, (4) French, (5) German, (6) Italian, (7) Japanese, (8) Chinese, (9) Korean, (10) Russian, (11) Polish, (12) Czech, (13) Slovak, (14) Hungarian, (15) Rumanian, (16) Bulgarian, (17) Greek, (18) Turkish, (19) Serbian, (20) Croatian, (21) Slovenian, (22) Yugoslav, (23) Montenegrin, (24) Macedonian, (25) Albanian, (26) Armenian, (27) Assyrian, (28) Persian, (29) Indian, (30) Chinese, (31) Japanese, (32) Korean, (33) Philippine, (34) Hawaiian, (35) Samoan, (36) Tongan, (37) Fijian, (38) New Guinean, (39) Australian, (40) New Zealand, (41) South African, (42) Egyptian, (43) Syrian, (44) Lebanese, (45) Iraqi, (46) Persian, (47) Afghan, (48) Indian, (49) Chinese, (50) Japanese, (51) Korean, (52) Philippine, (53) Hawaiian, (54) Samoan, (55) Tongan, (56) Fijian, (57) New Guinean, (58) Australian, (59) New Zealand, (60) South African, (61) Egyptian, (62) Syrian, (63) Lebanese, (64) Iraqi, (65) Persian, (66) Afghan, (67) Indian, (68) Chinese, (69) Japanese, (70) Korean, (71) Philippine, (72) Hawaiian, (73) Samoan, (74) Tongan, (75) Fijian, (76) New Guinean, (77) Australian, (78) New Zealand, (79) South African, (80) Egyptian, (81) Syrian, (82) Lebanese, (83) Iraqi, (84) Persian, (85) Afghan, (86) Indian, (87) Chinese, (88) Japanese, (89) Korean, (90) Philippine, (91) Hawaiian, (92) Samoan, (93) Tongan, (94) Fijian, (95) New Guinean, (96) Australian, (97) New Zealand, (98) South African, (99) Egyptian, (100) Syrian, (101) Lebanese, (102) Iraqi, (103) Persian, (104) Afghan, (105) Indian, (106) Chinese, (107) Japanese, (108) Korean, (109) Philippine, (110) Hawaiian, (111) Samoan, (112) Tongan, (113) Fijian, (114) New Guinean, (115) Australian, (116) New Zealand, (117) South African, (118) Egyptian, (119) Syrian, (120) Lebanese, (121) Iraqi, (122) Persian, (123) Afghan, (124) Indian, (125) Chinese, (126) Japanese, (127) Korean, (128) Philippine, (129) Hawaiian, (130) Samoan, (131) Tongan, (132) Fijian, (133) New Guinean, (134) Australian, (135) New Zealand, (136) South African, (137) Egyptian, (138) Syrian, (139) Lebanese, (140) Iraqi, (141) Persian, (142) Afghan, (143) Indian, (144) Chinese, (145) Japanese, (146) Korean, (147) Philippine, (148) Hawaiian, (149) Samoan, (150) Tongan, (151) Fijian, (152) New Guinean, (153) Australian, (154) New Zealand, (155) South African, (156) Egyptian, (157) Syrian, (158) Lebanese, (159) Iraqi, (160) Persian, (161) Afghan, (162) Indian, (163) Chinese, (164) Japanese, (165) Korean, (166) Philippine, (167) Hawaiian, (168) Samoan, (169) Tongan, (170) Fijian, (171) New Guinean, (172) Australian, (173) New Zealand, (174) South African, (175) Egyptian, (176) Syrian, (177) Lebanese, (178) Iraqi, (179) Persian, (180) Afghan, (181) Indian, (182) Chinese, (183) Japanese, (184) Korean, (185) Philippine, (186) Hawaiian, (187) Samoan, (188) Tongan, (189) Fijian, (190) New Guinean, (191) Australian, (192) New Zealand, (193) South 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Syrian, (1431) Lebanese, (1432) Iraqi, (1433) Persian, (1434) Afghan, (1435) Indian, (1436) Chinese, (1437) Japanese, (1438) Korean, (1439) Philippine, (1440) Hawaiian, (1441) Samoan, (1442) Tongan, (1443) Fijian, (1444) New Guinean, (1445) Australian, (1446) New Zealand, (1447) South African, (1448) Egyptian, (1449) Syrian, (1450) Lebanese, (1451) Iraqi, (1452) Persian, (1453) Afghan, (1454) Indian, (1455) Chinese, (1456) Japanese, (1457) Korean, (1458) Philippine, (1459) Hawaiian, (1460) Samoan, (1461) Tongan, (1462) Fijian, (1463) New Guinean, (1464) Australian, (1465) New Zealand, (1466) South African, (1467) Egyptian, (1468) Syrian, (1469) Lebanese



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number /

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Im S. S. *Wind Rose* Sailing from *San Francisco* *April 13<sup>th</sup>*, 193*5*, Arriving at Port of *Philadelphia* *April 21<sup>st</sup>*, 193*5*

| No.<br>on<br>List | NAME IN FULL |                 | AGE |      | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES                                                    |
|-------------------|--------------|-----------------|-----|------|-----|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME      | Yes | Mos. |     |                                                                                                                                           |                                                                                                               |                                                                             |
| 1                 | Wright       | Albert Ernest   | 74  | 8    | M   | Ind.                                                                                                                                      | Supreme Court <sup>Brown</sup> <del>Beaver</del><br>Dec. 18 <sup>th</sup> 1931                                | 1719 Quaker Cliff Ave<br>New York N.Y.                                      |
| 2                 | Quinn        | Edwin James     | 65  | 4    | M   | Ind.                                                                                                                                      | Judge Court Halland Ed.<br>Approx May 1881 or 1886                                                            | 311 East 72 <sup>nd</sup> Street<br>New York City                           |
| 3                 | Mahan        | Hugh            | 69  | 8    | M   | Ind.                                                                                                                                      | Judge Court Halland Ed.<br>Approx May 1881 or 1886                                                            | 5257 Bergen Ave<br>Jersey City N.J.                                         |
| 4                 | Burgess      | Victor          | 62  |      | M   | Chicago April 23 <sup>rd</sup> 1873                                                                                                       |                                                                                                               | 300 Sherman Road<br>Kenilworth Ill.                                         |
| 5                 | Edy          | Sarah Herbert   | 49  | 8    | F   | Milton Mass. July 4 <sup>th</sup> 1882                                                                                                    |                                                                                                               | 16 Deer Road<br>Newark N.J.                                                 |
| 6                 | Lothay       | Margaret Mullen | 50  | 9    | F   | Canal St. Mass. July 27 <sup>th</sup> 1884                                                                                                |                                                                                                               | Stanford University, Cal.<br>1198 24 <sup>th</sup> St. Cam.<br>Buffalo N.Y. |
| 7                 | McCarthy     | James           | 29  | 5    | M   | Buffalo N.Y. Nov 26 1904                                                                                                                  |                                                                                                               | Buffalo N.Y.                                                                |
| 8                 | Heller       | Norman          | 29  | 4    | M   | Hokomo, Ind. Dec. 6 <sup>th</sup> 1904                                                                                                    | 1905<br>U.S. District Court, Phila<br>October 1920                                                            | Hokomo Ind.                                                                 |
| 9                 | Hastin       | Abuel           | 40  |      | M   |                                                                                                                                           |                                                                                                               | Villa Santa Fe.                                                             |
| 10                | Horsley      | Edith           | 62  | 11   | F   | New York City May 12 <sup>th</sup> 1872                                                                                                   |                                                                                                               | Longwell & Co., New York                                                    |
| 11                | Langlan      | Francis Marion  | 27  | 10   | M   | Kelvinia Ind. July 7 <sup>th</sup> 1905                                                                                                   |                                                                                                               | Robert Graham House<br>New York City                                        |
| 12                | Enelly       | Quintus         | 26  | 8    | M   | Ind.                                                                                                                                      |                                                                                                               | 166 East 1 <sup>st</sup> St.<br>San Francisco Cal.                          |

Notes 1-2-3-4-5-6-10-11 were transferred to  
the New York manifest. Nos 7-8-9-12 were  
admitted at Philadelphia April 21, 1935 (all landed ship at Los Angeles, except #12)

Henry A. Harne  
Immigrant Inspector

-27-

- IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do solemnly, sincerely, and truly swear that I have had \_\_\_\_\_ years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_, and that I have made a personal examination of each of the aliens named herein, and that the foregoing list or Manifest shows \_\_\_\_\_ in relation to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_

NOTE.—The undersigned, by executing this affidavit, declares that he is a duly qualified and licensed Physician and Surgeon, and that he is entitled to practice as such by and under the authority of \_\_\_\_\_, and that he has made a personal examination of each of the aliens named herein, and that the foregoing list or Manifest shows \_\_\_\_\_ in relation to the best of his knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the matter for me to be used only to assist in determining the original stock.

|                  |                   |                                                |
|------------------|-------------------|------------------------------------------------|
| African (black). | Greek.            | Romanian.                                      |
| Armenian.        | Hebrew.           | Russian.                                       |
| Bohemian.        | Hungarian.        | Ruthenian (Rusniak).                           |
| Bosnian.         | Irish.            | Scandinavian (Norwegian, Danish, and Swedish). |
| Bulgarian.       | Italian (North).  | Scottish.                                      |
| Chinese.         | Italian (South).  | Serbian.                                       |
| Croatian.        | Japanese.         | Slovak.                                        |
| Cuban.           | Korean.           | Slovenian.                                     |
| Dalmatian.       | Lithuanian.       | Spanish.                                       |
| Dutch.           | Magyar.           | Spanish-American.                              |
| East Indian.     | Mexican.          | Syrian.                                        |
| English.         | Montenegrin.      | Turkish.                                       |
| Finnish.         | Moravian.         | Welsh.                                         |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).                |
| French.          | Polish.           |                                                |
| German.          | Portuguese.       |                                                |



List 1

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED STATES

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this pink sheet for the listing of

3-69

U.S.S. **ETRIA**

Passengers sailing from **BARCELONA, SPAIN**

MARCH 26

1935

| 1           | 2                                                                                    | 3                | 4          | 5         | 6   | 7                 | 8                     | 9       | 10                                                         | 11    | 12                                               | 13                         | 14             | 15                                        |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
|-------------|--------------------------------------------------------------------------------------|------------------|------------|-----------|-----|-------------------|-----------------------|---------|------------------------------------------------------------|-------|--------------------------------------------------|----------------------------|----------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------------|
| No. on List | HEAD-TAX STATUS<br><small>(This column for use of Government officials only)</small> | NAME IN FULL     |            | Age       | Sex | Married or single | Calling or occupation | Able to |                                                            |       | Nationality. Country of which citizen or subject | † Race or people           | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number<br><br><small>Prefix number with OIV, NIV, PV, or RP and give person of act involved</small> | Issued |             | Data concerning verifications of landings, etc.<br><br><small>(This column for use of Government officials only)</small> | *Last permanent residence |                                           |
|             |                                                                                      | Family name      | Given name | Yrs. Mos. |     |                   |                       | Read    | Read what language, or if exercise claimed, on what ground | Write |                                                  |                            | Country        | City or town, State, Province or District |                                                                                                                                                        | Place  | Date        |                                                                                                                          | Country                   | City or town, State, Province or District |
| 1           |                                                                                      | SOLER            | OSCAR      | 39        | M   | S                 | OWNER                 | Y       | ENG. SPAN.                                                 | Y     | CUBA                                             | CUBAN                      | CUBA           | HAVANA                                    | RP 1003259                                                                                                                                             | WASHN. | 1934 OCT 24 |                                                                                                                          | U.S.A.                    | NEW YORK                                  |
| 2           |                                                                                      | J. F. Schumacher |            |           |     |                   |                       |         |                                                            |       |                                                  | 1 alien passed and adm. by |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 3           |                                                                                      | Source Building  |            |           |     |                   |                       |         |                                                            |       |                                                  | Louis W. Notaris           |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 4           |                                                                                      | 1003259          |            |           |     |                   |                       |         |                                                            |       |                                                  | Immigrant Inspector        |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 5           |                                                                                      | 1003259          |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 6           |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 7           |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 8           |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 9           |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 10          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 11          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 12          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 13          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 14          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 15          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 16          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 17          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 18          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 19          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 20          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 21          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 22          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 23          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 24          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 25          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 26          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 27          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 28          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 29          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |
| 30          |                                                                                      |                  |            |           |     |                   |                       |         |                                                            |       |                                                  |                            |                |                                           |                                                                                                                                                        |        |             |                                                                                                                          |                           |                                           |

Total passengers . . . . . 6  
U. S. citizens . . . . . 5  
Aliens . . . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† Last of race will be found on the back of this sheet.



## List

The entries on this sheet must be typewritten or printed.

APRIL 21, 1935

- 30 -

Line American Export Line  
Owners American Export Line  
Local Agents



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, H. J. Clough, of the 5/s Exira, from Huelva, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

H. J. Clough  
Master

Officer.

Sworn to before me this 21 day of April, 1935  
at

Louise P. Nolan  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head last status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M (male) or F (female).

Column 5 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Occupation or profession).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example: Civil engineer, stationary engineer, housewife, cook, dressmaker, nurse, painter, steel patcher, iron molder, wood farmer, etc., and not simply as engineer, painter, molder, farmer, or other indefinite designation.

A distinction should be made between farmers and farm laborers, regardless of the amount of money received, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language (or, if exemption is claimed, upon what ground)." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Citizenship).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" is race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (North)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (South)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Reciprocity Visa, or Tourist Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12 and is self-explanatory.

Column 14 (Length of time of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. If it is intended for statistical purposes that steamship companies accurately show country or last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship and complete address of such relative. If no such relative living in country whence alien came give name and address of nearest relative or friend living in country of which citizen or subject. If such country is other than that whence alien came, address should include ship and insurance.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town and intended future permanent residence if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—This answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely to whom passage was paid, as self; husband, father, brother, or other relative; friends; steamship company, etc.

Column 21 (Whether in possession of \$20, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The entries should show whether or not (Yes or No) ever in United States before; and if so, the year (or period of years) and place, as New York, Philadelphia. Where in the United States more than once previously, indicate first residence only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 33. These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. **EXIRIA**

sailing from **HUELVA, SPAIN**

**APRIL 5, 1935**

Arriving at Port of

**WILMINGTON, DEL.**

**APRIL 21, 1935**

| No.<br>on<br>List | NAME IN FULL  |                    | AGE       | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                  |
|-------------------|---------------|--------------------|-----------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------|
|                   | FAMILY NAME   | GIVEN NAME         | Yrs. Mos. |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 1                 | <b>JEWEL</b>  | <b>JANNETTE</b>    | 48        | 9   | F                    | 8<br>Born<br>KANSAS CITY<br>JULY 7, 1886                                                                                                 | <i>Cons. Census 1911<br/>Washington D.C. 3/10/1935</i>                                                      | BLACKSTONE HOTEL<br>WASHINGTON D.C.       |
| 2                 | <b>BLISS</b>  | <b>NATALIE</b>     | 45        | 6   | F                    | 8<br>Born<br>BROOKLYN NEW YORK<br>NOV. 8, 1889                                                                                           | <i>Cons. Census Washington D.C. 3/10/1935</i>                                                               | 404 JEFFERSON AVE.,<br>BROOKLYN, NEW YORK |
| 3                 | <b>BAETZ</b>  | <b>RUDOLPH</b>     | 22        | 0   | M                    | 8<br>NEW YORK<br>APR. 22, 1913                                                                                                           | <i>Cons. Census Washington D.C. 3/10/1935</i>                                                               | 54 IDEM AVE. PELHAM MANOR<br>NEW YORK     |
| 4                 | <b>PINCUS</b> | <b>ARTHUR</b>      | 26        | 9   | M                    | M<br>NEW YORK<br>JULY 18, 1908                                                                                                           | <i>Cons. Census Washington D.C. 3/10/1935</i>                                                               | 30 WEST 90th STREET<br>NEW YORK CITY      |
| 5                 | <b>PINCUS</b> | <b>MARY</b>        | 27        | 9   | F                    | M<br>PHILADELPHIA<br>JULY 24, 1907                                                                                                       | <i>Cons. Census Washington D.C. 3/10/1935</i>                                                               | 30 WEST 90th STREET<br>NEW YORK CITY      |
| 6                 |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 7                 |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 8                 | <b>MOTTA</b>  | <b>GUISEPPI A.</b> | 27        | 6   | M                    | 8<br>CONSULAR PASSENGER<br>Born<br>BROOKLYN, NEW YORK<br>NOV. 3, 1907                                                                    |                                                                                                             | 709 29th AVE.<br>OAKLAND CALIFORNIA       |
| 9                 |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 10                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 11                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 12                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 13                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 14                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 15                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 16                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 17                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 18                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 19                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 20                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 21                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 22                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 23                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 24                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 25                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 26                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 27                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 28                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 29                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |
| 30                |               |                    |           |     |                      |                                                                                                                                          |                                                                                                             |                                           |

*Based and admitted to U.S. Citizenship  
by H. J. Clarnoff  
Master*

*H. J. Clarnoff  
Master*

- 31 -

Line  
Owners  
Local Agents

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, JOHN PETRONI, Surgeon of the U. S. SCANYORK, EMPLOYED BY OWNERS, do solemnly, sincerely, and truly SWEAR that I have had 3 YEARS years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of UNITED STATES LAWS, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, A B C D E F in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 23<sup>rd</sup> day of April, 1935  
at Philadelphia, Pa.

Lee B. Dolch

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be examined before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the persons named herein must be noted and signed by the surgeon before departure.  
If not so sailed with the vessel, the affidavit of verification shall be examined at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russians).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Serbian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This pink sheet is for the listing of

amer.  
S. S.

Passengers sailing from

June 17, 1935

| 1           | 2                                                                                   | 3            | 4          | 5         | 6                 | 7        | 8                     | 9        | 10                                                           | 11                                               | 12             | 13             | 14      | 15                                                                                                                                                           |                          |                                                                                                                                                    |                                           |                       |
|-------------|-------------------------------------------------------------------------------------|--------------|------------|-----------|-------------------|----------|-----------------------|----------|--------------------------------------------------------------|--------------------------------------------------|----------------|----------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------|
| No. on List | HEAD-TAX STATES<br><small>This column for use of Immigration officials only</small> | NAME IN FULL |            | Age       |                   | Sex      | Calling or occupation | Able to— |                                                              | Nationality, Country of which citizen or subject | Race or people | Place of birth |         | Immigration Visa, Passport Visa, or Reentry Permit number<br><small>Print number with Q, R, S, T, U, V, W, X, Y, Z, and the section of act involved.</small> | Issued<br><br>Place Date | Data concerning verifications of landings, etc.<br><small>Print number with Q, R, S, T, U, V, W, X, Y, Z, and the section of act involved.</small> | *Last permanent residence                 |                       |
|             |                                                                                     | Family name  | Given name | Yrs. Mos. | Married or single |          |                       | Read     | Read what language (or if exemption claimed, on what ground) |                                                  |                | Write          | Country |                                                                                                                                                              |                          |                                                                                                                                                    | City or town, State, Province or District | Country               |
| 1           | Str.                                                                                |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 2           | 619/13                                                                              |              |            | 8         |                   | Domestic |                       |          |                                                              |                                                  |                |                |         | Sec. 3-2<br>89                                                                                                                                               |                          | March 29 JUN 17 1935                                                                                                                               |                                           |                       |
| 3           | Str.                                                                                |              |            | 1         |                   | None     |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 4           | U.S. citizen                                                                        |              |            | 65        | 6                 |          |                       |          |                                                              |                                                  |                |                |         | U.S. Passport # 147                                                                                                                                          |                          |                                                                                                                                                    |                                           |                       |
| 5           | Str.                                                                                |              |            | 58        | 5                 |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          | 12/6/33-extended                                                                                                                                   |                                           | U.S.A. New York, N.Y. |
| 6           | 619/11                                                                              |              |            | 73        | 2                 |          |                       |          |                                                              | Denmark                                          |                |                |         | Sec. 3-2<br>Passport # 147                                                                                                                                   |                          |                                                                                                                                                    |                                           |                       |
| 7           | U.S. citizen                                                                        |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         | U.S. Passport # 9635                                                                                                                                         |                          |                                                                                                                                                    |                                           |                       |
| 8           | Str.                                                                                |              |            |           |                   |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           | U.S.A. Louisiana, La. |
| 9           | Str. JAN 25 1936 - 4400 57                                                          |              |            |           |                   |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 10          | None                                                                                |              |            | 4         | 8                 |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 11          | Str.                                                                                |              |            |           |                   |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 12          | Str.                                                                                |              |            | 7         |                   |          |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           | 1350-60th Ave.        |
| 13          | None                                                                                |              |            | 4         |                   | Child    |                       |          |                                                              | Denmark                                          |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           | 1350-60th Ave.        |
| 14          | 619/12                                                                              |              |            | 6         |                   | SS Ship. |                       |          |                                                              | Sweden                                           |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 15          | Str.                                                                                |              |            | 64        | 3                 | Domestic |                       |          |                                                              | Sweden                                           |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           | U.S.A. Lunce, Pa.     |
| 16          | None - Maarberg                                                                     | Karin E.     |            | 2         | 3                 | f        | Child                 | no       | Denmark                                                      | Scand -                                          | Denmark        | Copenhagen     |         | Sec. 3-2<br>Passport # 147                                                                                                                                   |                          |                                                                                                                                                    |                                           | Denmark Copenhagen    |
| 17          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 18          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 19          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 20          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 21          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 22          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 23          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 24          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 25          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 26          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 27          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 28          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 29          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |
| 30          |                                                                                     |              |            |           |                   |          |                       |          |                                                              |                                                  |                |                |         |                                                                                                                                                              |                          |                                                                                                                                                    |                                           |                       |

Local Agents:

Moore + McCormack S./S. Co. -  
Bourse Building,  
Philadelphia, Pa.

Lee B. Dolch

4. Die # 283 102  
202.76  
Later 17.20

Local Agents:  
Moore & Mc Cormack S./S. Co.  
Bourse Building,  
Philadelphia, Pa.

4. Dec 283 102  
later 200 76  
later 100

Lee B. Dolch

Total passengers . . . 34  
U. S. citizens . . . 19  
Aliens . . . 15

\* Permanent residence within the meaning of this manifest shall be actual or intended residence at one year's time.  
† List of names will be found on the back of this sheet.



List *L*

States, or a part of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

[illegible]

11 439



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, FRANCIS JOSEPH, MASTER of the S S SCANYORK, from NEW YORK, do solemnly, sincerely, and truly SWEAR that I have caused the surgeon of said vessel sailing thereon, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the persons named in the foregoing Lists or Manifest Sheets, A, B, C, D, E, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

*Francis Joseph*

MASTER Officer.

Sworn to before me this 23<sup>rd</sup> day of April, 1934  
at Philadelphia, Pa.

Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisors, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

**Column 2 (Head-tax status).**—Steamship lines should make no entries in this column. The space is for use of Government officials only.

**Column 4 (Age).**—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

**Column 5 (Sex).**—The entry should be either M (male) or F (female).

**Column 6 (Married or single).**—The answer should be M (married), S (single), W (widowed), or D (divorced).

**Column 7 (Calling or occupation).**—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example, field engineer, stationary engineer, locomotive engineer, mining engineer, house painter, steel peddler, iron molder, wood turner, etc., and not simply as engineer, painter, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of aliens on board.

**Column 8 (Able to read and write).**—This column is subdivided and contains the following question: "Read and write language for, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

**Column 9 (Native country).**—Question 9 should be construed to mean the country of which alien is a citizen or subject.

**Column 10 (Race or people).**—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which alien or subject, country of last permanent residence, and country of birth, and registers should be carefully checked by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

**WEST INDIAN**

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

**SPANISH AMERICAN**

"Spanish American" refers to the people of Central and South America of Spanish descent.

**AFRICAN (BLACK)**

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marche, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and those descendants should be designated as "Italian (south)".

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marche, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and those descendants should be designated as "Italian (south)".

**Column 11 (Place of birth).**—The name of birth should be given in addition to the city or town.

**Column 12 (Serial number of document presented).**—The serial number of alien's last document presented should be given, as "2014", "14", or "40", as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passenger Visa, or Temporary Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

**Column 13.**—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

**Column 14 (Verifications of income, etc.).**—Steamship lines should make no entries in this column. The space is for use of Government officials only.

**Column 15 (Last permanent residence).**—Actual or intended residence of one year shall constitute permanent residence. The last country to which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entry in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as "United States".

**Column 17 (Name and complete address of nearest relative residing in country whence alien came).**—The entry should give names, exact relationships, and complete addresses of such relatives. If no such relative living in country whence alien came, give name and address of relative or friend living in country whence alien came, and state whether he is relative or friend of alien came. Address should include street and number.

**Column 18 (Last destination).**—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show accurately the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

**Column 19 (Whether having a ticket to such final destination).**—The answer should be either Yes (ticket) or No (no ticket).

**Column 20 (By whom were passage paid).**—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; family; steamship company, etc.

**Column 21 (Whether in possession of \$20, and if less, how much).**—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among several members of the family.

**Column 22 (Whether ever before in the United States; and if so, when, and date of last departure).**—The entries should show whether or not alien has been in the United States before; and if so, the year and period of arrival and departure, Philadelphia. Where in the United States alien has been previously, in permanent residence only, and give exact or approximate date of last departure from the United States.

**Column 23 (Whether going to join relatives or friends).**—The answer should show whether going to join either a relative or friend, with name and complete address, and if a relative, the exact relationship.

**Columns 24 to 36.**—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspectors during the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has expressed a view to reentry for a period, the authority for such reentry should be given.



# AFFIDAVIT OF SURGEON

I, JOHN PETRONE, Surgeon of the S.S. SCANYORK, EMPLOYED BY OWNERS, do solemnly, sincerely, and truly SWEAR that I have had 3 YEARS years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of UNITED STATES LAWS, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, A B C D & E in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

John C. Petrone M.D.

Sworn to before me this 23<sup>rd</sup> day of April, 1923 at Philadelphia, Pa.

Lee B. Dolch.

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be completed before departure, either at port of arrival and any changes that may have occurred en route in the condition of any of the named aliens shall be made known to the collector at the port of arrival.  
If no surgeon sails with the vessel, the affidavit of verification shall be completed at the port of departure before some other authorized tendermaster oath.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification; the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusnicks).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Meravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List

E

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This pink sheet is for the listing of

2700a

Amer -  
S. S.

Passengers sailing from

19

| 1           | 2                                                                                    | 3            | 4          | 5    | 6    | 7   | 8                     | 9        | 10                                                       | 11    | 12                                                   | 13             | 14             | 15                                        |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
|-------------|--------------------------------------------------------------------------------------|--------------|------------|------|------|-----|-----------------------|----------|----------------------------------------------------------|-------|------------------------------------------------------|----------------|----------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|----------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------------|------------|
| No. on List | HEAD-TAX STATUS<br><small>(This column for use of Government officials only)</small> | NAME IN FULL |            | Age  |      | Sex | Calling or occupation | Able to— |                                                          |       | Nationality<br>(Country of which citizen or subject) | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number<br><small>(Prefix number with QIV, NOIV, PV, or RP and give section of act involved)</small> | Issued |      | Data concerning verifications of landings, etc.<br><small>(This column for use of Government officials only)</small> | *Last permanent residence |                                           |            |
|             |                                                                                      | Family name  | Given name | Yrs. | Mos. |     |                       | Read     | Read what-entire or if exemption claimed, on what ground | Write |                                                      |                | Country        | City or town, State, Province or District |                                                                                                                                                        | Place  | Date |                                                                                                                      | Country                   | City or town, State, Province or District |            |
| 1           | Str.                                                                                 |              |            |      | 8    |     |                       |          |                                                          |       | Finland                                              |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           | U.S.A.                                    | Huntington |
| 2           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 3           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 4           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 5           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 6           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 7           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 8           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 9           |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 10          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 11          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 12          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 13          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 14          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 15          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 16          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 17          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 18          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 19          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 20          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 21          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 22          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 23          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 24          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 25          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 26          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 27          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 28          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 29          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |
| 30          |                                                                                      |              |            |      |      |     |                       |          |                                                          |       |                                                      |                |                |                                           |                                                                                                                                                        |        |      |                                                                                                                      |                           |                                           |            |

Local agents:

Moore & McCormack S/S. Co.,  
Bourse Building,  
Philadelphia, Pa.

Dec 22 83/02  
Noted for 26/93  
Noted for 26/93

Total passengers . . . . 34  
U. S. citizens . . . . 19  
Aliens . . . . 15

\* Permanent residence within the meaning of this manifest shall be actual or intended residence at the time of entry.  
† List of names will be found on the back of this sheet.



States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

APR 23 1939

. 19

32-

14 430



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, FRANCIS JOSEPH MASTER, of the S.S. SCANYORK, from NEW YORK, do solemnly, sincerely, and truly SWEAR that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, A B C D E, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Francis Joseph  
MASTER Officer.

Sworn to before me this 23rd day of April, 1935  
at Philadelphia, Pa.

George J. Haines  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head-tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be either M (male) or F (female).

Column 6 (*Married or single*).—The answer should be M (married), S (single), WD (widowed), or D (divorced).

Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (*Ability to read and write*).—This column is subdivided and contains the following question: "Does [what language for, if exemption is claimed, upon what ground]?" In answering this question the language or dialect the alien is able to read and write should be stated. If alien is unable to read and write, exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Nationality*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "French" appearing under the head of country does not mean "French" as race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" as country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Veneto, and Emilia) and their descendants whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (North)". Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (South)".

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document*).—Print serial number of document with abbreviation "QIV", "NIV", "PVP", or "RVP", as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 14 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 15 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 16 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 17 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 18 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 19 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 20 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 21 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 22 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 23 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.

Column 24 (*Country of last permanent residence*).—This question has reference to the place and date of issue of the document described in column 12, not to self-employment.



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
years' experience as a Physician  
and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in  
the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized official.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and  
the language they speak. The original stock or blood shall be the basis of the classifi-  
cation, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Romanian.                                        |
| Armenian.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russnial).                            |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish Americans.                               |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |







# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of Philadelphia, Pa., April 23, 1932

| 16          | 17                                                                                                                                                         | 18                                                          | 19                                          | 20                                                | 21                                                                                                                                                                                                       | 22                                                    | 23                                                                                                           | 24                      | 25     | 26                                                                                                               | 27                                                                                                                                                                                                                                                                                                                                  | 28                                                           | 29                                                          | 30                   | 31                   | 32                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 33                                       | 34                                                      | 35     | 36     | 37         |      |                         |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------|--------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|----------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------|--------|------------|------|-------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br>(*Intended future permanent residence) |                                             | Whether having a ticket to such final destination | By whom was passage paid?<br><small>Whether alien paid his own passage, whether paid by relative, whether paid by any other person, or by any corporation, society, municipality, or government.</small> | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States, and if so, when and where?<br><small>(Last residence only)</small> |                         |        | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States<br><small>Whether alien intended to remain in country whence he came, or whether he intended to remain in the United States, or whether he intended to remain in the United States for a limited period, or whether he intended to remain in the United States for an indefinite period.</small> |                                                              |                                                             | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or opposes organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with an organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Condition of health, mental and physical | Deformed or crippled, Nature, length of time, and cause | Height |        | Color of   |      | Marks of identification |
|             |                                                                                                                                                            | Foreign country via, port of departure                      | In U. S. A., its territories or possessions |                                                   |                                                                                                                                                                                                          |                                                       | Yes or No                                                                                                    | Year or period of years | Where? |                                                                                                                  | Date of last departure                                                                                                                                                                                                                                                                                                              | Length of time alien intended to remain in the United States | Whether alien intended to be a citizen of the United States |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         | Feet   | Inches | Complexion | Hair |                         |
| 1           | Wife - Hedwig Rasmussen -<br># 32 - Sommerstadsgade -<br>Copenhagen, Denmark -                                                                             |                                                             | N. Y. - New York                            |                                                   | Seaman                                                                                                                                                                                                   | yes                                                   | Jan 7, 1931                                                                                                  |                         |        | # 25 South St. New York, N.Y.                                                                                    | no                                                                                                                                                                                                                                                                                                                                  | no                                                           | no                                                          | no                   | no                   | no                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | good                                     | no                                                      | 5' 6"  | fair   | gray       | blue | no                      |
| 2           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 3           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 4           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 5           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 6           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 7           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 8           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 9           |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 10          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 11          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 12          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 13          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 14          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 15          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 16          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 17          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 18          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 19          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 20          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 21          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 22          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 23          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 24          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 25          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 26          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 27          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 28          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 29          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |
| 30          |                                                                                                                                                            |                                                             |                                             |                                                   |                                                                                                                                                                                                          |                                                       |                                                                                                              |                         |        |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                     |                                                              |                                                             |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |                                                         |        |        |            |      |                         |

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Note - Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or opposes organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with an organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do  
(State whether Master, Pilot, or other Officer)  
solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own  
investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said  
Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

*Officer.*

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

*Immigration Officer.*

14-430

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1917; and also recording on separate manifests those aliens travelling in the third class and the second tourist class, whose visas bear the initials of Technical Admissions, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head for station)—Steamship line. If 1, make no entries in this column. The same is for 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

Column 1 (1961). The answer in this column may be expressed in years or months; the latter applying only to those under 1 year of age.

Column 6 (*Answered or verified*). The answer should be "Not answered" if it is (1) "No", "Yes", "Wd",

[illegible]

A distinction should be made between farmers and farm laborers, regardless of the amount of money spent, as follows:

A farmer is one who operates a farm, either for himself or for others. A farmer is not one who works on a farm for the owner who operates it.

Steamship companies should make this distinction on the manifest, and corrections should be made, if necessary, by inspectors and registry clerks during the post-voyage processing of the manifest.

Column 8 (*Does alien understand?*). This column is subdivided and contains the following questions: "Read what language?" if examination is required, upon what ground?" To answer this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Nat. natygo*). Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or peoples given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence and country of birth, and

France, citizen of France, country of last permanent residence, and country of birth, and manifest should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

## CUTMAN

The term "Cuban" refers to the Cuban people (not Negroes).

## WITNESS: J. N. DILLON.

\* "West Indianism" refers to the people of the West Indies other than either Cubans or Negroes.

## STANLEY AMERSON

"Spanish American" refers to the people of Central and South America of Spanish descent.

## AFRICAN (BLACK)

"African blood" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

## HALL/AGE (NORTH)

The people whose native is the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

## ITHACAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., countenments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column D (*Place of birth*). The State, Province, or District of birth should be shown in addition to the city of birth.

Column 12 (*Serial number*, *Prüfungsnr.*) = Prüfnr. serial number of document with abbreviation "IQT," "NQIV," "PV," or "RP," as appropriate, to designate whether it is Quota Immigrant, Nonquota Immigrant, Visa, Passport Visa, or Resident Permit; and principal action of the transfer document (if applicable) =

Column 12. This question is answered by the value and date of issue of the document.

Column 13. In question 1—Refers to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 15 (*Last permanent residence*). A mail or unincorporated residence of one

year shall constitute permanent residence. The 15 counties in which cities resided with the intention of remaining in the city or town shall be the last permanent residence. Regardless of length of actual residence therein. The entire 15 columns 13 should show the counties, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that states (or provinces) accurately show country of last permanent residence in respect of country of temporary residence country of

Country of last permanent residence and birth address (e.g., country and municipality of the

Column 11 (*Name and complete address of the person or persons to whom the property is being transferred*) should be completed for each person who is a resident of the United States and are returning from a foreign country. It should be completed for each person who is a resident of the United States.

Consider if  $\mathcal{C}$  is a *linear* (and complete) category, at least in the sense of being in *equilibrium* with *some* object. The only result gave naive, exact point-in-time, and complete address of such relative. If any such relation  $\mathcal{R}$  were also *linear* and *complete*, it would

If no such relative or friend living in country where alien came, give name and address of relative or friend in country of which citizen or subject is — if country is other than that whence alien came. Address should include street and number.

Column 18 *Intend destination*. The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether bearing a ticket in such final destination). The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom taxes were paid*).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; paid in share; paid jointly, etc.

Column 21 *whether in possession of \$5, and if so, how much*. This answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Volunt. 22. *Whether ever before in the United States said (Yes, when, where, when, and date of last departure).*—The parties should show whether or not (Yes or No) in the United States before; and if so the year (or period of years) and place, as 1824, 1827, Philadelphia. Where in the United States were they once peacefully, lawfully last met, dance only, and give exact or approximate date of last departure from the United States.

(Column 23) (*Who they going to join relative or friend*) - The answer should show whether going to join either a relative or friend with name and e-mail address; and if a relative, the exact relationship.

Columns 24 to 36.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to review by the questioner in the examination of witnesses. However, in answering question 30, if a man has been convicted and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such readmission should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Am* **S. S. *Am*** sailing from *Baltimore*, *APR 23*, 19*35*, Arriving at Port of *Baltimore*, 19*35*

| No.<br>ON<br>List | NAME IN FULL                                          |             | AGE      | SEX      | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|-------------------------------------------------------|-------------|----------|----------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME                                           | GIVEN NAME  |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 1                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 2                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 3                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 4                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 5                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 6                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 7                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 8                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 9                 | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 10                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 11                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 12                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 13                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 14                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 15                | <i>Am</i>                                             | <i>John</i> | <i>✓</i> | <i>✓</i> | <i>✓</i>             | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                                                | <i>Am. pp. # 146320</i><br><i>9/11/34</i>                                                                    |                          |
| 16                | # 2 transferred to alien passenger manifest sheet "A" |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 17                | Others admitted at Philadelphia                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 18                | April 23, 1935                                        |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 19                | George A. Marine                                      |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 20                | Immigrant Inspector                                   |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 21                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 22                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 23                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 24                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 25                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 26                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 27                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 28                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 29                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |
| 30                |                                                       |             |          |          |                      |                                                                                                                                          |                                                                                                              |                          |

Line *AMERICAN SCANTIC LINE*  
Owners *MOORE & MCCORMACK CO. INC.*  
Local Agents

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

**LIST OF UNITED STATES CITIZENS**  
(FOR THE IMMIGRATION AUTHORITIES)

S. S. *STATE*

sailing from *London, England*, *April 3rd*, 19*35*, Arriving at Port of *Philadelphia*, *APR 23 1935*, 19*35*

| No.<br>ON<br>LIST | NAME IN FULL |                                               | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|-----------------------------------------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME                                    |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 1                 | <i>Craft</i> | <i>Tennison Man</i>                           |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 2                 |              | <i>Admitted at Philadelphia April 23 1935</i> |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 3                 |              | <i>George D. Hume</i>                         |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 4                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 5                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 6                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 7                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 8                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 9                 |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 10                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 11                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 12                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 13                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 14                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 15                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 16                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 17                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 18                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 19                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 20                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 21                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 22                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 23                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 24                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 25                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 26                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 27                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 28                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 29                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |
| 30                |              |                                               |     |     |                      |                                                                                                                                          |                                                                                                              |                          |

*Joseph*  
*Marsh*

Line *AMERICAN SCANTIC LINE*

Owners *MOORE & MORTIMER*

Local Agents

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3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number C

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. PLANTER

sailing from SAINT PAUL, MAINE, 1935, Arriving at Port of SAINT PAUL, MAINE, 1935

| No.<br>on<br>List | NAME IN FULL   |                            | AGE       | Sex      | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES        |
|-------------------|----------------|----------------------------|-----------|----------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------|
|                   | FAMILY NAME    | GIVEN NAME                 | Yrs. Mos. |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 1                 | <u>PLANTER</u> | <u>JOHN D.</u>             | <u>30</u> | <u>M</u> |                      | <u>Born July 5th 1905, New Haven, Conn.</u>                                                                                              | <u>See pp 2 &amp; 3</u>                                                                                      | <u>1000 Ave., Boston, Mass.</u> |
| 2                 |                | <u>Edw. H. Plummer</u>     |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 3                 |                | <u>John D. Plummer</u>     |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 4                 |                | <u>John D. Plummer</u>     |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 5                 |                | <u>Immigrant Inspector</u> |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 6                 |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 7                 |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 8                 |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 9                 |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 10                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 11                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 12                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 13                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 14                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 15                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 16                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 17                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 18                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 19                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 20                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 21                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 22                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 23                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 24                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 25                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 26                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 27                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 28                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 29                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |
| 30                |                |                            |           |          |                      |                                                                                                                                          |                                                                                                              |                                 |

*J. Joseph  
Worth*

37-

Line AMERICAN SCANTIC LINE  
Owners MOORE & CO. CHARTER  
Local Agents

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3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Mariano Cajigas, M. D., Surgeon of the American ss. "BARNARA" sailing therewith, do solemnly, sincerely, and truly swear that I have had four years years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners of Puerto Rico, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 25<sup>th</sup> day of April, 1935 at Philadelphia, Pa.

Lee B. Dolch

U. S. IMMIGRANT INSPECTOR

Note.—If the surgeon sails with the vessel, this affidavit of examination shall be accounted full and complete, unless at port of arrival, and any changes that may have occurred since the departure of the vessel are reported to the nearest U. S. Consulate or U. S. Customs Office. If the surgeon sails without the vessel, the affidavit of examination shall be accounted full and complete only if it is accompanied by a report of the surgeon to the nearest U. S. Consulate or U. S. Customs Office.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                 |                   |                                              |
|-----------------|-------------------|----------------------------------------------|
| African, Black. | Czech.            | Roumanian.                                   |
| American.       | Hebrew.           | Russian.                                     |
| Belgian.        | Herzegovinian.    | Ruthenian (Rusniak).                         |
| Brazilian.      | Irish.            | Scandinavian (Norwegian, Danes, and Swedes). |
| Bulgarian.      | Irish (North).    | Scotch.                                      |
| Chinese.        | Irish (South).    | Servian.                                     |
| Croatian.       | Japanese.         | Slovak.                                      |
| Cuban.          | Korean.           | Slovenian.                                   |
| Dalmatian.      | Lithuanian.       | Spanish.                                     |
| Dutch.          | Magyar.           | Spanish American.                            |
| East Indian.    | Mexican.          | Syrian.                                      |
| English.        | Montenegrin.      | Turkish.                                     |
| Finnish.        | Moravian.         | Welsh.                                       |
| Flemish.        | Pacific Islander. | West Indian (other than Cuban).              |
| French.         | Polish.           |                                              |
| German.         | Portuguese.       |                                              |



List one

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port or a port of continental United States. This (pink) sheet is for the listing of

3571

S. S. "BARBARA" (American)

Passengers sailing from San Juan, Puerto Rico

April 20

1935

| 1           | 2                                                      | 3                                      | 4                | 5   | 6                 | 7                     | 8                                                                        | 9                                                    | 10               | 11                                     | 12                      | 13              | 14      | 15                                               |
|-------------|--------------------------------------------------------|----------------------------------------|------------------|-----|-------------------|-----------------------|--------------------------------------------------------------------------|------------------------------------------------------|------------------|----------------------------------------|-------------------------|-----------------|---------|--------------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(For use of Customs officials only) | NAME IN FULL<br>Family name Given name | Age<br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to<br>Read what language (or, if exemption claimed, on what ground) | Nationality<br>(Country of which citizen or subject) | Race or people   | Place of birth<br>Country City or town | Immigration Visa Number | Issued at       | Date    | List permanent residence<br>Country City or town |
| 1           |                                                        | Mandry, Jones de Helena                | 28               | F.  | M.                | Housewife             | Yes English                                                              | Yes Venezuela                                        | Spanish-American | Venezuela Caracas                      | Form 546<br>#59876      | San Juan, P. R. | 4/20/35 | P. R. Ponce                                      |
| 2           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 3           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 4           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 5           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 6           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 7           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 8           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 9           |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 10          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 11          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 12          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 13          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 14          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 15          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 16          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 17          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 18          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 19          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 20          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 21          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 22          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 23          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 24          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 25          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 26          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 27          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 28          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 29          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |
| 30          |                                                        |                                        |                  |     |                   |                       |                                                                          |                                                      |                  |                                        |                         |                 |         |                                                  |

Lee B. Dolch -  
U. S. IMMIGRANT INSPECTOR

Total passengers . . . . . 44  
U. S. citizens . . . . . 43  
Aliens . . . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List **one**

The entries on this sheet must be typewritten or printed.

States, or a part of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of Philadelphia, Pa.

April 25

1935

| 16          | 17                                                                                       | 18                                                          | 19           | 20                                                                                                                                                                                        | 21                                                | 22                                                    | 23                                                                   | 24                                                                                                                | 25                                           | 26                                                             | 27                                                          | 28                                                              | 29                                                                                                                    | 30                   | 31                   | 32                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 33                                       | 34                                                      | 35                       | 36                        |                         |
|-------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|---------------------------|-------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came | Final destination<br>(*Intended future permanent residence) |              | By whom was passage paid?<br>(Whether alien paid his own passage, whether paid by relative, whether paid by any other person, or by any corporation, society, association, or government) | Whether having a ticket to such final destination | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States; and if so, when and where? | Whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address | Purpose of coming to United States           |                                                                |                                                             |                                                                 |                                                                                                                       |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of—<br>Hair<br>Eyes | Marks of identification |
|             |                                                                                          | State                                                       | City or town |                                                                                                                                                                                           |                                                   |                                                       | Yes or No                                                            |                                                                                                                   | If yes—<br>Year or period of years<br>Where? | Whether alien intends to become a citizen of the United States | Length of time alien intends to remain in the United States | Whether alien intends to become a resident of the United States | Does he plan to obtain or discharge of his time for case and treatment of his disease, or to be supported by charity? | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. |                                          |                                                         |                          |                           |                         |
| 1           | Father in law, Salvador Mandy,<br>Box 491, Ponce, P. R.                                  | P.R.                                                        | New York     | Yes Husband                                                                                                                                                                               | Yes                                               | Yes                                                   | 1911<br>to<br>1935<br>P. R.                                          | Accompanying husband on vacation.<br>Hotel Ansonia, New York, N.Y.                                                | No                                           | 1 month                                                        | Yes                                                         | No                                                              | No                                                                                                                    | No                   | No                   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Good                                     | No                                                      | 5 7                      | Brk.                      | Bra. Blue Nose          |
| 2           |                                                                                          |                                                             |              |                                                                                                                                                                                           |                                                   |                                                       |                                                                      |                                                                                                                   |                                              |                                                                |                                                             |                                                                 |                                                                                                                       |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                           |                         |
| 3           |                                                                                          |                                                             |              |                                                                                                                                                                                           |                                                   |                                                       |                                                                      |                                                                                                                   |                                              |                                                                |                                                             |                                                                 |                                                                                                                       |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                           |                         |
| 4           |                                                                                          |                                                             |              |                                                                                                                                                                                           |                                                   |                                                       |                                                                      |                                                                                                                   |                                              |                                                                |                                                             |                                                                 |                                                                                                                       |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                           |                         |
| 5           |                                                                                          |                                                             |              |                                                                                                                                                                                           |                                                   |                                                       |                                                                      |                                                                                                                   |                                              |                                                                |                                                             |                                                                 |                                                                                                                       |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                           |                         |

1. Alien Examined  
Came to D.C.  
J. J. Rambo #45.  
U.S.P.I.S.

Form 548 ALIEN CERTIFICATE - INSULAR TERRITORY (ORIGINAL)  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE  
No. 59876  
Port of Philadelphia, Pa.  
This is to certify that the alien Salvador Mandy, native of P.R., citizen of P.R. and of the Spanish race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at Philadelphia, Pa. 11/23/34, ex S. S. 11/23/34  
Status under Immigration Act of 1934 when admitted Permanent Resident  
Said alien is about to proceed to Philadelphia, Pa. via the seaport of Philadelphia, Pa. and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 34; Height, 5 7; Color of hair, Brk.  
Color of eyes, Blue  
Identifying documents in alien's possession None  
Signature of alien Salvador Mandy  
Surrendered at Philadelphia, Pa. to Inspector Lee B. Dale APR 25 1935  
April 25, 1935

38-

Note.—Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



## List one

The entries on this sheet must be typewritten or printed.

April 28

1936

I have examined  
the book & it is  
very good, H.H.  
A.L.

38



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, J. W. Mumford, Master, of the American ss. "BARBARA", from San Juan, Puerto Rico, do solemnly swear that I have caused the surgeon of said vessel, William H. Smith, or the surgeon employed by the owner thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing lists or manifests, one in number, and that from the report of said surgeon and from my own investigation, I certify that none of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said lists or manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this  
at Philadelphia, Pa-

Lee B. Dolch,  
Arbitration Officer

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

1. *Example 1* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.
2. *Example 2* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.
3. *Example 3* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.
4. *Example 4* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.
5. *Example 5* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.
6. *Example 6* The first column of the matrix  $A$  is the 11th column in the column. The space is the space of the column.

A former prisoner who became a farm owner for himself or his family.  
A former prisoner who was arrested for the same who reported.  
A former prisoner who was arrested for the same who reported.  
A former prisoner who was arrested for the same who reported.

of Albert to the D. C. Circuit. The court said it should uphold and certify the decision on the question of what time of day it is if respondents' testimony, taken as a whole, is believable. In assessing the respondents' testimony, the court said it should find that it is real street time. If the respondents' testimony and other information from the months' investigation, taken as a whole, is believable, it should be given.

the case of the  $2 \times 2$  matrix  $\mathbf{A}$  is  $\det \mathbf{A} = a_{11}a_{22} - a_{12}a_{21}$ . The matrix should have the same dimensions as the vector  $\mathbf{b}$ .

[illegible]

West Indian, a reference to a people of the Americas living in the Caribbean. Cf. *Journal of Neiverson*.

Spanish American refers to the people of Central and South America of Spanish descent.

<sup>10</sup> African Black "trees" to the African Name, sometimes coming from other islands of the West Indies, sometimes with African, European, or African-Anglo names, with admixture of blood of the African Name class. I have omitted under this heading:

THE PEOPLE OF THE NORTH TO THE SOUTH OF THE RIVER. In the Southern States the comparative lack of Negroes, Indians, Mexicans and Chinese and the consequent lack of labor is felt. And indeed, America in any other country, had she caused the "Irishman question." Most of these people are of Celtic blood, and of the Celtic language.

The present volume is devoted to that portion of Italy north of the Apennine Peninsula, and to the countries of Central Europe, France, the Netherlands, Prussia, Russia, the German Empire, Austria, Spain, Portugal, Greece, Sicily, and Sardinia and their dependencies. The volume contains 160 plates.

Colburn to *His Excellency the Governor*—A statement of an intended residence of a year, with  
certificates pertinent to same. The last expires in 1871, given readily with the exception of  
residence and year of birth, which the last expires in 1872, given readily with the exception of

[illegible][illegible]

of a certain class of unified structures, namely, of unified  $\mathcal{A}$ - $\mathcal{B}$  structures. The present study is devoted to the study of the structure of the class of unified  $\mathcal{A}$ - $\mathcal{B}$  structures. The present study is devoted to the study of the structure of the class of unified  $\mathcal{A}$ - $\mathcal{B}$  structures.

Colony growth in the presence of  $\beta$ -glucuronidase was measured by the formation of a blue color in the presence of 5-bromo-4-chloro-3-indolyl- $\beta$ -D-glucuronide (X-Gal) (Molecular Biology Resources, Inc., Beverly, MA) as substrate. The color was developed in the presence of 0.1% (v/v) of a 10% (w/v) solution of potassium ferricyanide and 0.1% (v/v) of a 1% (w/v) solution of potassium ferric chloride. The color was developed in the presence of 0.1% (v/v) of a 10% (w/v) solution of potassium ferricyanide and 0.1% (v/v) of a 1% (w/v) solution of potassium ferric chloride. The color was developed in the presence of 0.1% (v/v) of a 10% (w/v) solution of potassium ferricyanide and 0.1% (v/v) of a 1% (w/v) solution of potassium ferric chloride.

Column 21 (lines 10-11) is a *paṇḍita* (learned man) and a *śāstrī* (scholar in law). The power should also be given to him either a relative or friend, and then, when necessary, a friend, with name and address, as follows:

Column 22 (lines 12-13) are names of well-known persons and the names of the persons for whom the *paṇḍita* is to be consulted in the management of a case. If necessary, the

consequence question 25, if then has been reported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARRABA" (American) sailing from San Juan, Puerto Rico, April 20, 1935, Arriving at Port of Philadelphia, Pa., April 25, 1935

| No.<br>on<br>Last | NAME IN FULL  |                  | AGE       | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                    |
|-------------------|---------------|------------------|-----------|-----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------|
|                   | Family Name   | Given Name       | Yrs. Mos. |     |                                                                                                                                          |                                                                                                              |                                             |
| 1                 | Adams         | James            | 31        | 7   | M. M.                                                                                                                                    | Cedar Bluffs, Va., September 28, 1903                                                                        | The Plains, Va.                             |
| 2                 | Allen         | Dorothy          | 32        | 7   | F. M.                                                                                                                                    | Memphis, Tenn., July 19, 1902                                                                                | 1431 Latham St., Memphis, Tenn.             |
| 3                 | Allen         | John 3rd         | -         | 5   | M. S.                                                                                                                                    | San Juan, P. R., November 12, 1934                                                                           | do.                                         |
| 4                 | Ashford       | Ashlon           | 35        | -   | M. M.                                                                                                                                    | Washington, D. C., April 7, 1900                                                                             | 30 S. 4th St., Lebanon, Pa.                 |
| 5                 | Ashford       | Dorothy          | 29        | 5   | F. M.                                                                                                                                    | Philadelphia, Pa., October 27, 1905                                                                          | do.                                         |
| 6                 | Barletta      | Sara             | 30        | 7   | F. S.                                                                                                                                    | San German, P. R., October 4, 1904<br>Federal Court, San Juan, P. R., Dec. 11, 1933                          | 536 W. 111th St., New York, N. Y.           |
| 7                 | Bechtol       | Margaret Susanna | 32        | 5   | F. S.                                                                                                                                    | New Castle, Pa., November 10, 1902                                                                           | 327 E. Wallace Ave., New Castle, Pa.        |
| 8                 | Benites       | Clemencia        | 27        | 2   | F. S.                                                                                                                                    | Carolina, P. R., February 13, 1907                                                                           | Hotel Benjamin Franklin, Philadelphia, Pa.  |
| 9                 | Calderon Miro | Jose             | 46        | 2   | M. M.                                                                                                                                    | San Juan, P. R., October 15, 1888                                                                            | Hotel Taft, New York, N. Y.                 |
| 10                | Calderon      | Teresa E.        | 45        | 2   | F. M.                                                                                                                                    | Arecibo, P. R., February 12, 1880                                                                            | do.                                         |
| 11                | Drummond      | Dorothy H.       | 40        | 8   | F. S.                                                                                                                                    | Tranton, N. J. -<br>Louisville, Ky., July 26, 1894                                                           | 208 Hillcrest Ave., Louisville, Ky.         |
| 12                | Fernandes     | Marcolina        | 32        | 3   | F. S.                                                                                                                                    | Agua Buenas, P. R., November 13, 1902                                                                        | 1815 W. Baltimore St., Baltimore, Md.       |
| 13                | Font          | Manuel           | 46        | 7   | P. M.                                                                                                                                    | Humacao, P. R., September 8, 1888                                                                            | Hotel Bayflower, Washington, D. C.          |
| 14                | Gregg         | Minnie           | 65        | 7   | F. M.                                                                                                                                    | Superville, Va., September 11, 1869                                                                          | Relay, Md.                                  |
| 15                | Gregg         | Isabella         | 27        | 2   | F. S.                                                                                                                                    | Relay, Md., September 28, 1907                                                                               | do.                                         |
| 16                | Hayes         | Nellie           | 80        | 2   | F. M.                                                                                                                                    | Auburn, Me., January 25, 1855                                                                                | 18 Roberts Rd., W. Medford, Mass.           |
| 17                | Hayes         | Mildred          | 45        | 7   | F. S.                                                                                                                                    | Auburn, Me., June 14, 1889                                                                                   | do.                                         |
| 18                | Herriot       | Laura            | 29        | 8   | F. S.                                                                                                                                    | San Juan, P. R., August 14, 1905                                                                             | 2803 F. St., N. W., Washington, D. C.       |
| 19                | Hudo          | Esperanza        | 52        | -   | F. M.                                                                                                                                    | Arecibo, P. R., September 30, 1882                                                                           | Hotel Taft, New York, N. Y.                 |
| 20                | Hudo          | Maria Cristina   | 20        | 9   | F. S.                                                                                                                                    | Rio Piedras, P. R., July 19, 1914                                                                            | do.                                         |
| 21                | King          | Gora O. M.       | 47        | 7   | F. M.                                                                                                                                    | Philbrook, Mont., December 22, 1887                                                                          | 21 Pearl St., Belfast Me.                   |
| 22                | Knaack        | Helen Dolores    | 24        | 7   | F. S.                                                                                                                                    | Hartley, Ia., December 29, 1910                                                                              | Box 626, Hartley, Ia.                       |
| 23                | Mandry        | Margarita        | 50        | -   | F. M.                                                                                                                                    | Ponce, P. R., April 4, 1885                                                                                  | Hotel Ansonia, New York, N. Y.              |
| 24                | Mandry        | Paster           | 29        | 3   | M. M.                                                                                                                                    | Ponce, P. R., January 11, 1906                                                                               | do.                                         |
| 25                | Mandry        | Paster, Jr.      | 7         | -   | M. S.                                                                                                                                    | Ponce, P. R., July 13, 1927                                                                                  | do.                                         |
| 26                | Mandry        | Yoelise          | 6         | 7   | F. S.                                                                                                                                    | Ponce, P. R., December 15, 1928                                                                              | do.                                         |
| 27                | Margarida     | Rafael           | 63        | 8   | M. M.                                                                                                                                    | Rio Piedras, P. R., August 12, 1871                                                                          | Hotel Chesterfield, New York, N. Y.         |
| 28                | Margarida     | Ana Maria        | 31        | 11  | F. M.                                                                                                                                    | Manati, P. R., May 16, 1902                                                                                  | do.                                         |
| 29                | Margarida     | Rafael A.        | 7         | 7   | M. S.                                                                                                                                    | San Juan, P. R., August 28, 1927                                                                             | do.                                         |
| 30                | Morgan        | Joseph V.        | 47        | 2   | M. M.                                                                                                                                    | Leonardtown, Md., February 14, 1888                                                                          | 5620 Moorland Lane, Edgemoor, Bethesda, Md. |

Lee B. Dolch

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

Master, ss. "BARRABA"

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

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3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARBARA" (American) sailing from San Juan, Puerto Rico, April 20, 1935, Arriving at Port of Philadelphia, Pa., April 25, 1935

| No.<br>IN<br>LINE | NAME IN FULL       |                | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                    |
|-------------------|--------------------|----------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------|
|                   | Family Name        | Given Name     |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 1                 | Morzan             | Elizabeth W.   | 42  | F.  | M. Takoma Park, Md., November 13, 1892                                                                                             |                                                                                                        | 5620 Moorland Lane, Edgemoor, Bethesda, Md. |
| 2                 | Morzan             | Joseph V., Jr. | 14  | M.  | S. Washington, D. C., June 26, 1920                                                                                                |                                                                                                        | do.                                         |
| 3                 | Morzan             | Augusta Anne   | 13  | F.  | S. Washington, D. C., February 9, 1922                                                                                             |                                                                                                        | do.                                         |
| 4                 | Morzan             | David P.       | 6   | M.  | S. Edgemoor, Md., April 11, 1929                                                                                                   |                                                                                                        | do.                                         |
| 5                 | Ortega             | Enrique        | 42  | M.  | M. Mayaguez, P. R., July 27, 1893                                                                                                  |                                                                                                        | 540 Green Ave., Brooklyn, N.Y.              |
| 6                 | Robledo            | Secundina      | 32  | F.  | S. Ponce, P. R., July 7, 1903                                                                                                      |                                                                                                        | Hotel Ansonia, New York, N.Y.               |
| 7                 | Simpson            | Junice H. L.   | 49  | F.  | M. Northford, Conn., August 8, 1885                                                                                                |                                                                                                        | Northford, New Haven Co., Conn.             |
| 8                 | Suarez             | Ramon B.       | 40  | M.  | M. Loiza, P. R., March 8, 1895                                                                                                     |                                                                                                        | Hotel Benjamin Franklin, Philadelphia, Pa.  |
| 9                 | Suarez, Benitez de | Maria          | 37  | F.  | M. Carolina, P. R., May 23, 1897                                                                                                   |                                                                                                        | do.                                         |
| 10                | Sulsona            | Estela         | 27  | F.  | S. Cayey, P. R., April 23, 1908                                                                                                    |                                                                                                        | 851 E. 162nd St., Bronx, N.Y.               |
| 11                | Townsend           | Clarence S.    | 38  | M.  | S. Worcester, Mass., March 4, 1897                                                                                                 |                                                                                                        | 87 May St., Worcester, Mass.                |
| 12                | Weichel            | Addie W.       | 62  | F.  | M. Allentown, Pa., February 26, 1873                                                                                               |                                                                                                        | 2328 Liberty St., Elgin, Ill.               |
| 13                | Weissman           | Saul B.        | 37  | M.  | M. Pittsburgh, Pa., December 29, 1897                                                                                              |                                                                                                        | 5843 Ferree St., Pittsburgh, Pa.            |
| 14                |                    |                |     |     | Lee B. Dolch                                                                                                                       |                                                                                                        |                                             |
| 15                |                    |                |     |     | U. S. IMMIGRANT INSPECTOR                                                                                                          |                                                                                                        |                                             |
| 16                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 17                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 18                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 19                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 20                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 21                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 22                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 23                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 24                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 25                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 26                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 27                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 28                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 29                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |
| 30                |                    |                |     |     |                                                                                                                                    |                                                                                                        |                                             |

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

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# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Russian -

S. S. Friedrich Engels

sailing from Odessa, Russia

, April 1, 1935, Arriving at Port of Philadelphia, Pa - April 26, 1935

| No. | NAME IN FULL |            | AGE  | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                       |
|-----|--------------|------------|------|-----|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| 1   | Family Name  | Given Name | Yrs. | M.  |                                                                                                                                  |                                                                                                       |                                                                |
| 1   | Raphals      | Victor     | 23   | 1   | m                                                                                                                                | U.S. Passport # 5892 - Issued at Washington, D.C. April 8, 1911                                       | 1356 College ave.,                                             |
| 2   | Bassman      | Sophie     | 21   | 11  | f                                                                                                                                | New York, N.Y. May 1, 1912.<br>U.S. Passport # 5891 - Issued at Washington, D.C. May 4, 1913          | Bronx, New York, N.Y.<br>246 Lexington ave.,<br>New York, N.Y. |
| 3   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 4   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 5   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 6   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 7   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 8   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 9   |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 10  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 11  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 12  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 13  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 14  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 15  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 16  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 17  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 18  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 19  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 20  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 21  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 22  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 23  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 24  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 25  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 26  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 27  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 28  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 29  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |
| 30  |              |            |      |     |                                                                                                                                  |                                                                                                       |                                                                |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

- 41 -

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Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "Darion"

sailing from Pto Barrios, Guatemala

, April 21st., 1935

, Arriving at Port of Philadelphia via Charleston S.C., 1935

April 26th. April 28th. 1935

| No.<br>on<br>List | NAME IN FULL |              | AGE  |      | SEX | MARRIED OR<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES           |
|-------------------|--------------|--------------|------|------|-----|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------------------------------|
|                   | Family Name  | Given Name   | Yrs. | Mos. |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 1                 | Jennings     | Rex LAURENCE | 33   | 7    | M   | M                    | Sept. 8th. 1901 Hale, Michigan                                                                                                        | Entered Guatemala 15 May 1935<br>Departed 250 miles from Guatemala                                         | Webster Hall.<br>Detroit, Michigan |
| 2                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 3                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 4                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 5                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 6                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 7                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 8                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 9                 |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 10                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 11                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 12                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 13                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 14                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 15                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 16                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 17                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 18                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 19                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 20                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 21                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 22                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 23                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 24                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 25                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 26                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 27                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 28                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 29                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |
| 30                |              |              |      |      |     |                      |                                                                                                                                       |                                                                                                            |                                    |

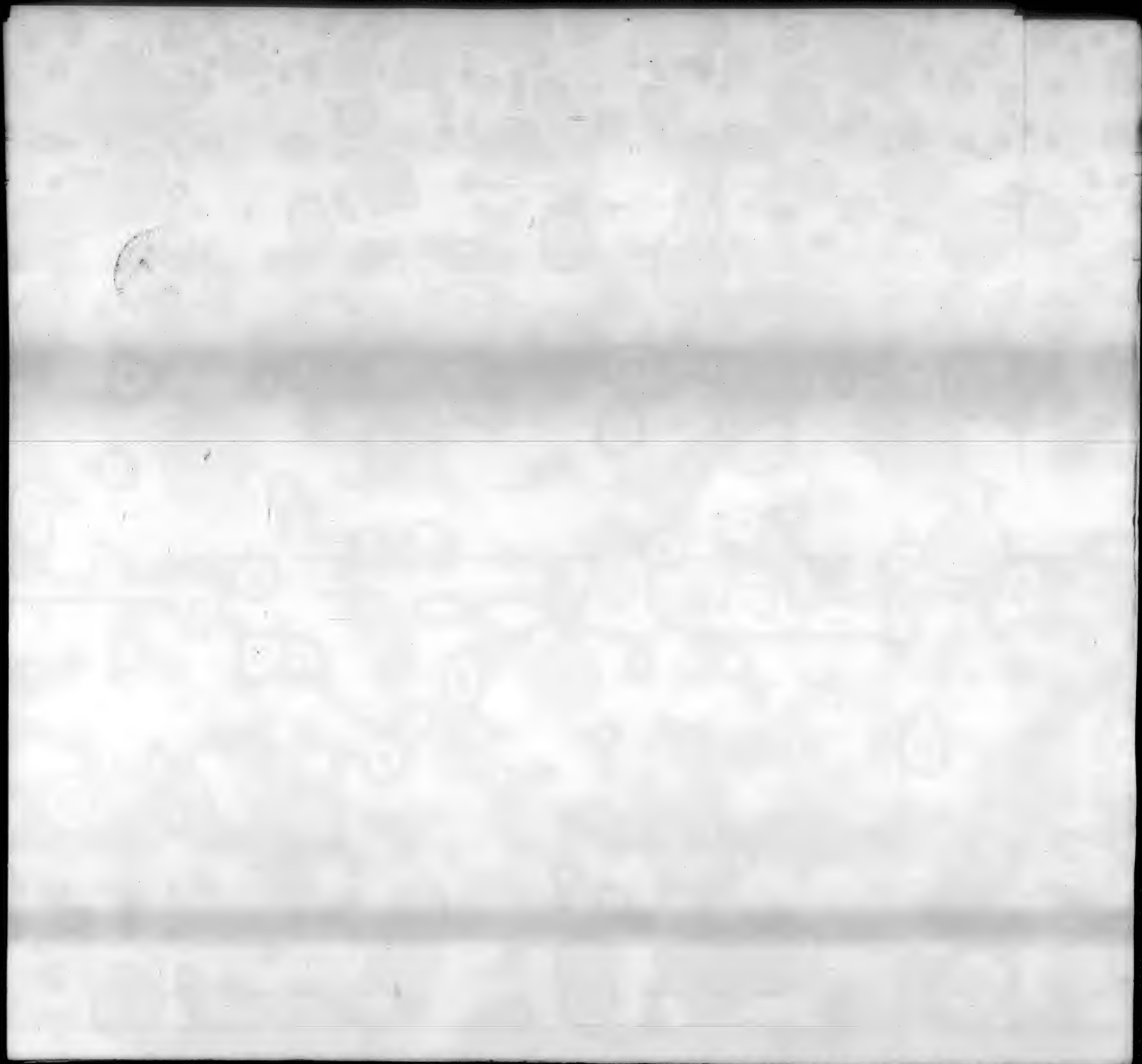
Chas se  
Hgm

- 42 -

Line United Fruit  
Owners United Fruit  
Local Agents

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Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. AM. M.S. Gulfbird

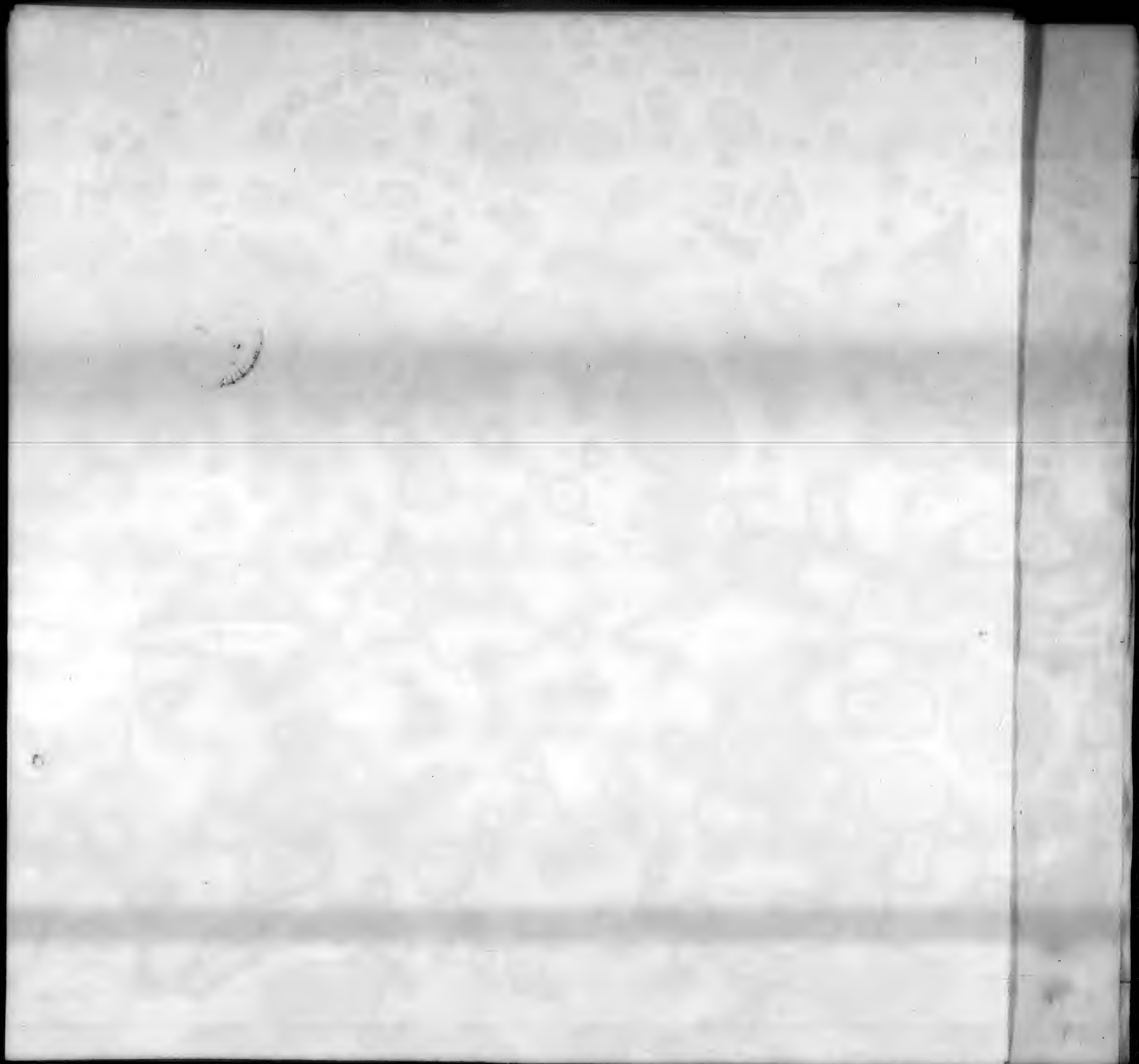
sailing from Las Piedras, Venez. April 20th 1935, 19, Arriving at Port of Philadelphia Pa. April 27th 1935 19

|        |          |    | IF NATIVE OF UNITED STATES IN FULL POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES           |
|--------|----------|----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------|
| Hughes | Margaret | 36 | F. M. July 27th 1898 St. Cloud Minnesota                                                                                                 | #36, Monrovia, Liberia 6/6/29                                                                                | 401 5th Ave<br>St. Cloud Minnesota |
| Hegbom | Mae      | 43 | F. M. May 29th 1892 Chicago Ill.                                                                                                         | #564501 4/32                                                                                                 | 1325 Farwell Ave<br>Chicago Ill.   |

*See index of names  
for names of parents*

*E. B. Stone*







### AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
years' experience as a physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_,  
\_\_\_\_\_—, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at

## LIST OF RACES OR PEOPLES

"Race or people" is to be denigrated by the first from which alien springs and the language they speak. The original stock of blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                  |                                                  |
|------------------|------------------|--------------------------------------------------|
| African (black), | Greek,           | Romanian,                                        |
| Armenian,        | Hebrew,          | Russian,                                         |
| Belgian,         | Hungarian,       | Rumanian (Roumanian),                            |
| Bosnian,         | Irish,           | Scandinavian (Norwegian,<br>Danish and Swedish), |
| Bulgarian,       | Italian (North), | Scottish,                                        |
| Chinese,         | Italian (South), | Serbian,                                         |
| Croatian,        | Japanese,        | Slovak,                                          |
| Cuban,           | Korean,          | Slovenian,                                       |
| Dalmatian,       | Lithuanian,      | Spanish,                                         |
| Dutch,           | Magyar,          | Spanish American,                                |
| East Indian,     | Mexican,         | Syrian,                                          |
| English,         | Moldavian,       | Turkish,                                         |
| Finnish,         | Moravian,        | Welsh,                                           |
| Flamish,         | Pasiechlander,   | W. Indian (other than<br>Cuba),                  |
| French,          | Polish,          |                                                  |
| German,          | Portuguese,      |                                                  |



## List

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this (white) sheet.

3572

U. S. S. "Elswick Park"

### Passengers sailing from

Huelva, Spain

April

1930

| No. on List. | HEAD TAX STATUS.<br><small>This column for use of Government officials only.</small> | NAME IN FULL | Age.      | Sex.               | Calling or occupation. | Able to                                                        | Nationality.<br>(Country of which citizen or subject.) | Race or people. | Last permanent residence. | Final destination.                                                                        |
|--------------|--------------------------------------------------------------------------------------|--------------|-----------|--------------------|------------------------|----------------------------------------------------------------|--------------------------------------------------------|-----------------|---------------------------|-------------------------------------------------------------------------------------------|
|              |                                                                                      | Family name. | Yrs. Mos. | Married or single. |                        | Read what language (or, if exemption claimed, on what ground). | Write.                                                 |                 | Country.                  | City or town.                                                                             |
|              |                                                                                      | Given name.  |           |                    |                        |                                                                |                                                        |                 |                           | The name and complete address of nearest relative or friend in country whence alien came. |
| 54           |                                                                                      | Lanka        | 24        | 2                  | M                      | Seaman                                                         | Polish                                                 | Poland          | Poland                    | Poland                                                                                    |
| 55           |                                                                                      | Damian       | 28        | 10                 | M                      | Seaman                                                         | Polish                                                 | Poland          | Poland                    | Poland                                                                                    |
| 56           |                                                                                      | Patz         | 21        | 8                  | M                      | Seaman                                                         | Polish                                                 | Poland          | Poland                    | Poland                                                                                    |

Passed by U.S.P.S.  
 Detained by B.S.I. by Insp. J. Marine  
 See file 4399/49  
 Excluded by B.S.I., No appeal, May 1, 1935.  
 James H. Hingler, Imm.

|                  |       |
|------------------|-------|
| Total passengers | 1,000 |
| U. S. citizens   | 1,000 |
| Aliens           | 1,000 |

\* Dominant regions – within the region of the sample of local government areas, population is concentrated in a few areas.  
† List of races will be available at the time of publication.



## List

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

Arriving at Port of Philadelphia, Pa., April 30, 1935

[illegible][illegible]



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do  
 solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
 employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
 foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own  
 investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
 section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in  
 said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

\_\_\_\_\_  
 Officer.

\_\_\_\_\_  
 Immigration Officer.

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (Master's name).—Steamship lines should make necessary in this column. The name  
 is for use of Government authorities only.

Column 3 (Age).—The master in this column should be expressed in years or months; the latter  
 apply only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M. (male) or F. (female).

Column 5 (Married or single).—The answer should be M. (married), S. (single), V. (widowed), or  
 D. (divorced).

Column 6 (Occupation).—The entry should describe as accurately as possible the occupa-  
 tion, trade, or profession of each alien, as, for example, Clerk, Engineer, Shipowner, Captain, Cook,  
 Steward, Cabin Boy, etc. In the case of a passenger, the occupation should be given in full, and not  
 simply a general description, such as "passenger," "tourist," "vacationer," etc.

A distinction should be made between those who are engaged in the pursuit of a trade or  
 profession and those who are engaged in agriculture, stock raising, or other pursuits.

A former resident who has returned to his native country should be so stated.

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The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.

### ITALIAN (SOUTH)

The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.

### ITALIAN (NORTH)

The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.

### ITALIAN (EAST)

The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.

### ITALIAN (WEST)

The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.

### ITALIAN (CENTRAL)

The people who are named in this column of the Alien Manifests are those who are  
 admitted to the United States, and who are not of the classes excluded from admission  
 by section three of the Immigration Act. The names of the aliens should be given in full,  
 and in the case of a passenger, the name should be given in full, and not simply a  
 general description, such as "passenger," "tourist," "vacationer," etc.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number \_\_\_\_\_

**LIST OF UNITED STATES CITIZENS**  
(FOR THE IMMIGRATION AUTHORITIES)

*Am mls*  
S.S. "WASAY" \_\_\_\_\_

Sailing from ALBANY, NEW YORK, N.Y., APRIL 26th., 192 <sup>35</sup> Arriving at Port of PHILADELPHIA, PA., MAY 1st., 192 <sup>35</sup>

| No.<br>ON<br>LIST. | NAME IN FULL             |             | AGE  |      | Sex | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES.          |
|--------------------|--------------------------|-------------|------|------|-----|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------|
|                    | FAMILY NAME.             | GIVEN NAME. | Yrs. | Mos. |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 1                  | Morrison                 | Stanford E. | 55   | 4    | M   | M                    | St. Paul, Minnesota, December 31/1869                                                                                                     |                                                                                                               | 196 East Street,<br>New York, N.Y. |
| 2                  | Admitted at Philadelphia |             |      |      |     |                      | May 1, 1935                                                                                                                               |                                                                                                               |                                    |
| 3                  | May 1, 1935              |             |      |      |     |                      | George D. Marine                                                                                                                          |                                                                                                               |                                    |
| 4                  | Immigrant Inspector      |             |      |      |     |                      | Wm. Phasch                                                                                                                                |                                                                                                               |                                    |
| 5                  |                          |             |      |      |     |                      | Master                                                                                                                                    |                                                                                                               |                                    |
| 6                  |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 7                  |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 8                  |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 9                  |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 10                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 11                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 12                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 13                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 14                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 15                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 16                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 17                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 18                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 19                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 20                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 21                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 22                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 23                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 24                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 25                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 26                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 27                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 28                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 29                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |
| 30                 |                          |             |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                    |

- 45 -

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



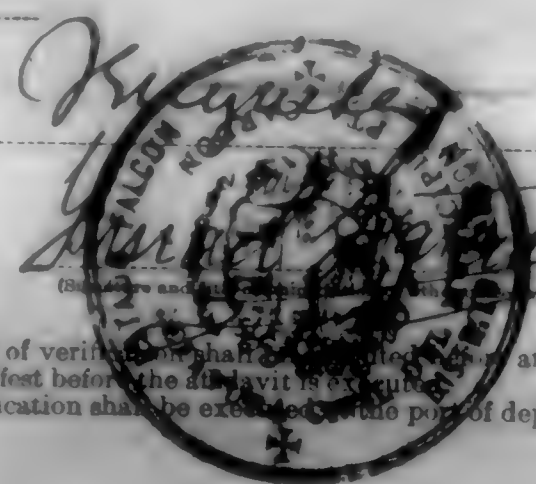




# AFFIDAVIT OF SURGEON

I, Gustavo Ortiz, Surgeon of the Yucuala Gov., do solemnly, sincerely, and truly swear that I have had five years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Yucuala Gov., and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 27<sup>th</sup> day of April, 1924, at Las Ruinas



NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be made before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is signed. If no surgeon sails with the vessel, the affidavit of verification shall be made before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russniak).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List 3

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this (pink) sheet in the listing of

3573

S. S. Gulfwing

Passengers sailing from Las Piedras, Venezuela

April 26th, 1935

| 1           | 2                                                                     | 3            | 4          | 5    | 6    | 7   | 8                     | 9              | 10    | 11                                                    | 12               | 13             | 14                                        | 15                 |                                    |                                                                                                       |                           |                                           |             |
|-------------|-----------------------------------------------------------------------|--------------|------------|------|------|-----|-----------------------|----------------|-------|-------------------------------------------------------|------------------|----------------|-------------------------------------------|--------------------|------------------------------------|-------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------------|-------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |            | Age  |      | Sex | Calling or occupation | Able to—       |       | Nationality.<br>(Country of which citizen or subject) | † Race or people | Place of birth |                                           | Issued             |                                    | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) | *Last permanent residence |                                           |             |
|             |                                                                       | Family name  | Given name | Yrs. | Mos. |     |                       | Read           | Write |                                                       |                  | Country        | City or town, State, Province or District | Place              | Date                               |                                                                                                       | Country                   | City or town, State, Province or District |             |
| 1           | Spec. Reg.<br>619114                                                  | Vincent      | William    | ✓ 30 | ✓ 0  | ✓ M | ✓ S                   | Shipping Clerk | Y     | English                                               | Y                | Great Britain  | England                                   | Sunderland England | No. 28<br>S. No. 355<br>In-transit | Maracaibo<br>Venezuela<br>S.A.                                                                        | April 24th, 1935          | Maracaibo<br>Venezuela                    | Esdo. Zulia |
| 2           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 3           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 4           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 5           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 6           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 7           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 8           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 9           |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 10          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 11          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 12          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 13          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 14          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 15          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 16          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 17          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 18          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 19          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 20          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 21          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 22          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 23          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 24          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 25          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 26          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 27          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 28          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 29          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |
| 30          |                                                                       |              |            |      |      |     |                       |                |       |                                                       |                  |                |                                           |                    |                                    |                                                                                                       |                           |                                           |             |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

Head Tax Dice # 223109  
Dated May 10, 1935

1419  
293

Local agents:  
Gulf Refining Co.,  
Girard Point,  
Philadelphia, Pa.

*Lee B. Dolch*  
U. S. IMMIGRANT INSPECTOR

*Head for Dice # 223109  
dated May 10, 1935*

*1419  
293*

Local agents:  
Gulf Refining Co.,  
Girard Point,  
Philadelphia, Pa.

Total passengers . . . . . 3  
U. S. citizens . . . . . 2  
Aliens . . . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia, Pa., May. 5th., 1935

| 16          | 17                                                                                                                                                         | 18                                                      | 19                                          | 20                         | 21                                                        | 22                                                                                         | 23           | 24             | 25                                                                                                               | 26                                 | 27     | 28                   | 29                   | 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 31                                            | 32                                             | 33                                       | 34                                                      | 35                     | 36   | 37        |      |                         |        |      |      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------|----------------------------|-----------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------|----------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|--------|----------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------------|------------------------------------------|---------------------------------------------------------|------------------------|------|-----------|------|-------------------------|--------|------|------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination (Indicate future permanent residence) |                                             | By whom was passage paid?  | Whether in possession of U.S. visa, and if yes, how much? | Whether ever before in the United States, and if so, when and where? (Last residence only) |              |                | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States |        | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Whether subject and dependent within one year | Whether convicted and deported within one year | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height                 |      | Color of— |      | Marks of identification |        |      |      |
|             |                                                                                                                                                            | Foreign country via (port of departure)                 | In U. S. A., its territories or possessions |                            |                                                           | State                                                                                      | City or town | Yes or No      |                                                                                                                  | Year or period of years            | Where? |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         | Date of last departure | No   | Yes       | Feet |                         | Inches | Hair | Eyes |
| 1           | R. T. Vincent<br>22 Holmelands Park<br>Sunderland, England.                                                                                                | Maracaibo,                                              | Venezuela S.A.Y                             | Venezuela Gulf Oil Company | Y                                                         | July 1932                                                                                  | New York     | July 27th 1932 | R. T. Vincent (Father)<br>22 Holmelands Park<br>Sunderland, England                                              | No                                 | Yes    | No                   | N                    | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | N                                             | N                                              | N                                        | N                                                       | N                      | Good | N         | 5    | 8                       | fair   | grey | None |
| 2           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 3           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 4           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 5           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 6           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 7           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 8           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 9           |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 10          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 11          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 12          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 13          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 14          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 15          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 16          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 17          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 18          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 19          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 20          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 21          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 22          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 23          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 24          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 25          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 26          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 27          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 28          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 29          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |
| 30          |                                                                                                                                                            |                                                         |                                             |                            |                                                           |                                                                                            |              |                |                                                                                                                  |                                    |        |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |                                                |                                          |                                                         |                        |      |           |      |                         |        |      |      |

Notes.—Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, James Master, of the M/S Gulfport, from Las Piedras, Puerto Rico, solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, one in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

James Master  
Master, Officer.

Sworn to before me this 5th day of May, 1935  
at Philadelphia, Pa.

Lee B. Dolch  
Immigration Officer.



INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head-tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language for, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Verifications of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$50, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Column 24 to 30.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reappliance should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Amals*  
*S.S.*

Sailing from

, 192 , Arriving at Port of

192

| No.<br>List | NAME IN FULL<br>Family Name Given Name Year Mon | SEX<br>M F | IF NATIVE OF UNITED STATES (GIVE PLACE OF BIRTH AND DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE) | IF NATURALIZED (GIVE NAME AND LOCATION OF COURT WHERE ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS) |
|-------------|-------------------------------------------------|------------|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| 1           |                                                 |            |                                                                                                     |                                                                                                        |
| 2           |                                                 |            |                                                                                                     |                                                                                                        |
| 3           |                                                 |            |                                                                                                     |                                                                                                        |
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| 19          |                                                 |            |                                                                                                     |                                                                                                        |
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| 28          |                                                 |            |                                                                                                     |                                                                                                        |
| 29          |                                                 |            |                                                                                                     |                                                                                                        |
| 30          |                                                 |            |                                                                                                     |                                                                                                        |

*Admitted at Philadelphia*  
*May 1, 1921*  
*James M. Davis*  
*Immigrant Inspector*

*Wm. Frank*  
*Master*

- 45 -

- IMPORTANT NOTICE.**
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
  2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.











## List

The entries on this sheet must be typewritten or printed.

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>*Indicate multiple permanent destination</small>                               | By whom was passage paid?                                                                                                                                         | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States                                                                                                                                                                                            | Whether a polygamist                                                                            | Whether an anarchist                                                                            | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet Inches | Color of<br>Hair Eyes | Marks of identification |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|-----------------------|-----------------------|-------------------------|
|             |                                                                                                                                                            | Foreign country via port of departure<br>In U. S. A., its territories or possessions<br>State City or town | Whether alien paid his own passage, whether paid by relative, whether paid by any other person or by any corporation, secret society, municipality, or government | Whether in possession of \$20. and if less, how much?                | If Yes<br>Yes or No Year or period of years Where? Date of last departure                                        | Whether alien intends to remain in United States<br>Length of time alien intends to remain in United States<br>Whether alien intends to be employed in United States<br>Whether alien intends to be employed in United States | Whether alien is a polygamist<br>Whether alien is a polygamist<br>Whether alien is a polygamist | Whether alien is an anarchist<br>Whether alien is an anarchist<br>Whether alien is an anarchist |                                          |                                                         |                       |                       |                         |
| 1           | <i>father</i><br>R. T. Vincent<br>22 Holmelands Park<br>Sunderland, England.                                                                               | Marscaibo,<br>Venezuela S.A Y                                                                              | Venezuela<br>Buff Oil Company Y                                                                                                                                   | July 1932<br>New York                                                | R. T. Vincent (Father)<br>22 Holmelands Park<br>Sunderland, England                                              | <i>days</i><br>No                                                                                                                                                                                                             | No                                                                                              | N                                                                                               | N                                        | N                                                       | N                     | N                     | N                       |
| 2           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 | Good                                     |                                                         | 5 8                   | fair                  |                         |
| 3           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 4           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 5           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 6           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 7           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 8           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 9           |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 10          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 11          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 12          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 13          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 14          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 15          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 16          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 17          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 18          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 19          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 20          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 21          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 22          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 23          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 24          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 25          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 26          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 27          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 28          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 29          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |
| 30          |                                                                                                                                                            |                                                                                                            |                                                                                                                                                                   |                                                                      |                                                                                                                  |                                                                                                                                                                                                                               |                                                                                                 |                                                                                                 |                                          |                                                         |                       |                       |                         |

*1 alien was removed - OK*  
*Chas. Cadwallader*  
*assumpt*

*46*

46

<sup>1</sup> Note that the text of question 28 is as it flows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or a lawless disaffected or so-called underground government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of a lawless society, any organization for training and teaching of belief in or opposition to our government, which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assault or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized governmental because of his or their official character.



List 2

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this pink sheet is for the listing of

3573

S. S.

Gulfwing

Passengers sailing from

Las Piedras, Venezuela.

April 23th, 1935

| No. on List                                                                         | HEAD-TAX STATUS<br><small>Place of birth for naturalization only</small> | NAME IN FULL |            | Age       | Sex | Married or single | Calling or occupation | Able to |                                                            |       | Nationality, Country of which citizen or subject | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number                | Issued    |                | Data concerning verifications of landings, etc. | Last permanent residence |                                           |
|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------|------------|-----------|-----|-------------------|-----------------------|---------|------------------------------------------------------------|-------|--------------------------------------------------|----------------|----------------|-------------------------------------------|--------------------------------------------------------------------------|-----------|----------------|-------------------------------------------------|--------------------------|-------------------------------------------|
|                                                                                     |                                                                          | Family name  | Given name | Yrs. Mos. |     |                   |                       | Read    | Read what language or if exemption claimed, on what ground | Write |                                                  |                | Country        | City or town, State, Province or District | Prefix number with QIV, NOIV, PV, or RP and give section of act involved | Place     | Date           |                                                 | Country                  | City or town, State, Province or District |
| 1                                                                                   | 619114                                                                   | Vincent      | Willier    | 30        | 0   | M                 | Shipping Clerk        | Y       | English                                                    | Y     | Great Britain                                    | English        | England        | Sunderland                                | Transit entry No. 28 3-10-35                                             | Maracaibo | April 24, 1935 |                                                 | Venezuela                | England                                   |
| <p style="text-align: center;">Lee B. Dolch<br/>U. S. IMMIGRANT INSPECTOR</p>       |                                                                          |              |            |           |     |                   |                       |         |                                                            |       |                                                  |                |                |                                           |                                                                          |           |                |                                                 |                          |                                           |
| <p style="text-align: center;">Heard in District 2-13-35<br/>J. B. Dolch</p>        |                                                                          |              |            |           |     |                   |                       |         |                                                            |       |                                                  |                |                |                                           |                                                                          |           |                |                                                 |                          |                                           |
| <p>Local agents:<br/>Gulf Refining Co.,<br/>Girard Point,<br/>Philadelphia, Pa.</p> |                                                                          |              |            |           |     |                   |                       |         |                                                            |       |                                                  |                |                |                                           |                                                                          |           |                |                                                 |                          |                                           |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

Head of List 223103  
dated March 24, 1935

Local agents:  
Gulf Refining Co.,  
Girard Point,  
Philadelphia, Pa.

Total passengers . . . . . 3  
U. S. citizens . . . . . 2  
Aliens . . . . . 1

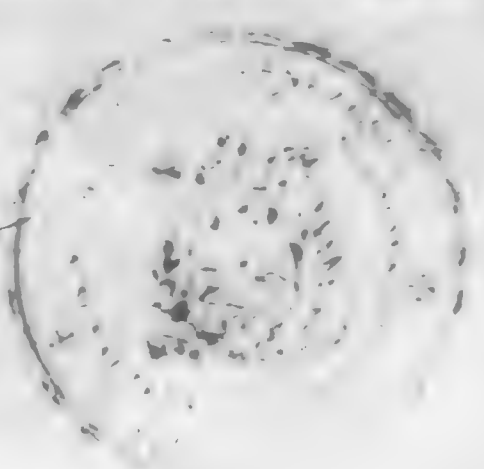
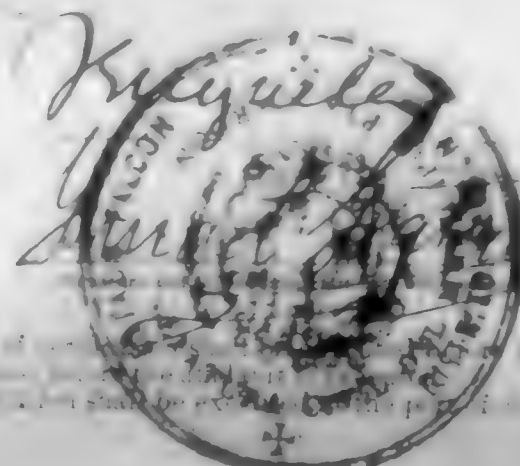
\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of names will be found on the back of this sheet.



# AFFIDAVIT OF SURGEON

I, Myranda Gov, Surgeon of the Port, do  
 solemnly, sincerely, and truly swear that I have had one years' experience as a Physician  
 and Surgeon, and that I am entitled to practice as such by and under the authority of Myranda Gov,  
 and that I have made a personal examination of  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this 27<sup>th</sup> day of April, 1925  
 at Las Pudas



Note.—If a surgeon, with the usual, this affidavit is to be sworn to by the surgeon, and if a physician, and if a change of name has occurred, it is to be sworn to by the physician, and if a change of name has occurred, it is to be sworn to by the physician, and if a change of name has occurred, it is to be sworn to by the physician.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusniak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Amer.

S. S.

Gulfwing

sailing from Las Piedras, Venezuela

April. 28th, 1935

Arriving at Port of Philadelphia. May. 5th.

, 1935

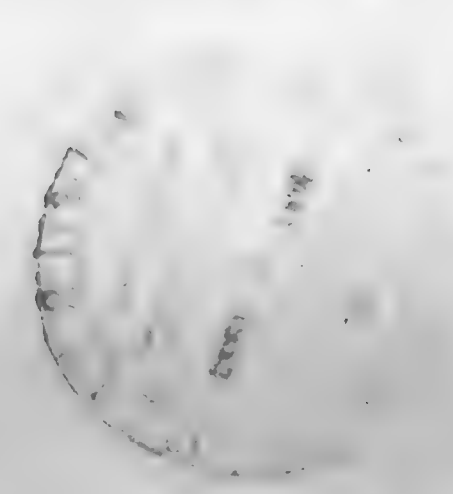
| No.<br>or<br>List | NAME IN FULL |                    | AGE   | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                  |
|-------------------|--------------|--------------------|-------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME         |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 1                 | Gundersen    | George A.          | 33 9  | M   | S                    |                                                                                                                                          | District Court -<br>San Francisco Calif. Aug. 15 1931                                                        | 116 Drumm Street, San Francisco<br>Calif. |
| 2                 | Petersen     | Carl<br>Charles H. | 37 10 | "   | "                    | July. 30th 1897 U.S. Passport<br>Chicago Ill. #2-1-                                                                                      |                                                                                                              | Payallup, Washington                      |
| 3                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 4                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 5                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 6                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 7                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 8                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 9                 |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 10                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 11                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 12                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 13                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 14                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 15                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 16                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 17                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 18                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 19                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 20                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 21                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 22                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 23                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 24                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 25                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 26                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 27                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 28                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 29                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |
| 30                |              |                    |       |     |                      |                                                                                                                                          |                                                                                                              |                                           |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

Line Gulf Refining Co.  
Owners "  
Local Agents "

- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
  2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.







Report on the arrival of United States citizens and citizens of insular possessions of the United States arriving at a port of call, or a port of call, from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of call, or a port of call, from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Amer. S. S.

"TIVIVES"

sailing from

Puerto Barrios, Guatemala - 4/28  
 PORTS AS BELOW  
 (Via Charlotte, N.C. - 8/28)

, 1935, Arriving at Port of PHILADELPHIA, PA. - MAY 5th, 1935.

| No. on List | NAME IN FULL                                                         | AGE          | Sex  | MARRIED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND DATE OF CITIZENSHIP WHERE ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ADDRESS               |
|-------------|----------------------------------------------------------------------|--------------|------|-------------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------|
|             | FIRST NAME                                                           | LAST NAME    | Yrs. | Mar.              |                                                                                                                                 |                                                                                                         |                       |
|             | PASSENGER EMBARKED AT BOSTON, MASS. - APRIL 17th, 1935.              |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 1           | VAN ANTWERP                                                          | TOWNSEND     | 29   | 8                 | M S                                                                                                                             | August 15th, 1905.                                                                                      | Altamont, N.Y.        |
|             | PASSENGERS EMBARKED AT PUERTO BARRIOS, GUATEMALA - APRIL 28th, 1935. |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 2           | KIDDER                                                               | ALFRED V.    | 49   | 6                 | M M                                                                                                                             | October 29th, 1885.                                                                                     | Marquette, Mich.      |
| 3           | KIDDER                                                               | MADELEINE A. | 43   | 9                 | F M                                                                                                                             | July 6th, 1891.                                                                                         | Ipswich, Mass.        |
| 4           | KIDDER                                                               | BARBARA      | 18   | 8                 | F S                                                                                                                             | August 20, 1916.                                                                                        | Santa Barbara, Calif. |
| 5           | SMITH                                                                | EDWARD       | 49   | 6                 | M M                                                                                                                             | November 1st, 1885.                                                                                     | New York City         |
| 6           | WIGGINS                                                              | LAURA E.     | 20   | 9                 | F S                                                                                                                             | July 31st, 1914.                                                                                        | Needham, Mass.        |
| 7           | Lee B. Dolch -<br>U. S. IMMIGRANT INSPECTOR                          |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 8           |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 9           |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 10          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 11          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 12          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 13          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 14          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 15          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 16          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 17          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 18          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 19          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 20          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 21          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 22          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 23          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 24          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 25          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 26          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 27          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 28          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 29          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |
| 30          |                                                                      |              |      |                   |                                                                                                                                 |                                                                                                         |                       |

162 Washington Ave, Albany, N.Y.

Andover, Mass.

Andover, Mass.

Andover, Mass.

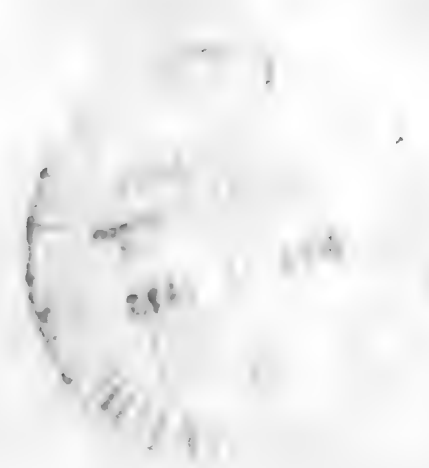
70 - Hillside Ave. -  
 Freeport, N.Y.

Dedham, Mass.

- IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
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 3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
 4. List on this form only United States citizens or citizens of an insular possession of the United States.

Line United Fruit Company,  
 Owners United Fruit S.S. Corporation,  
 Local Agents United Fruit Company.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Amer. S. S. Ruth Kellogg - sailing from San Juan, Porto Rico, - April 29, 1935, Arriving at Port of Philadelphia, Pa. May 5, 1935

| No. | NAME IN FULL                            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ADDRESS IN UNITED STATES              |
|-----|-----------------------------------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|---------------------------------------|
| 1   | Rodriguez Jose' Miguel                  | 22  | 4   | m                                                                                                                                  | ♂                                                                                                     | Dec. 13, 1912 - Ponce, Porto Rico.    |
| 2   | Vely Domingo                            | 21  | 9   | m                                                                                                                                  | ♂                                                                                                     | July 10, 1913 - Mayaguez, Porto Rico. |
| 3   | A. Ponte Miguel A                       | 19  | 6   | m                                                                                                                                  | ♂                                                                                                     | Nov. 3, 1915 - San Juan, Porto Rico.  |
| 4   | Bonilla Zenon                           | 28  | 8   | m                                                                                                                                  | ♂                                                                                                     | July 6, 1906 - Bayamon, Porto Rico.   |
| 5   | Perez Damaso                            | 30  | 5   | m                                                                                                                                  | m                                                                                                     | Dec. 11, 1904 - San Juan, Porto Rico. |
| 6   | Hernandez Roberto                       | 21  | 9   | m                                                                                                                                  | ♂                                                                                                     | July 29, 1913 - San Juan, Porto Rico. |
| 7   | Lee B. Dolch - Harry Nord -             |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 8   | U. S. IMMIGRATION INSPECTOR             |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 9   | Master                                  |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 10  | See File # 4399/48 - dated May 7, 1935. |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 11  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 12  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 13  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 14  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 15  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 16  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 17  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 18  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 19  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 20  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 21  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 22  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 23  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 24  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 25  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 26  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 27  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 28  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 29  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |
| 30  |                                         |     |     |                                                                                                                                    |                                                                                                       |                                       |

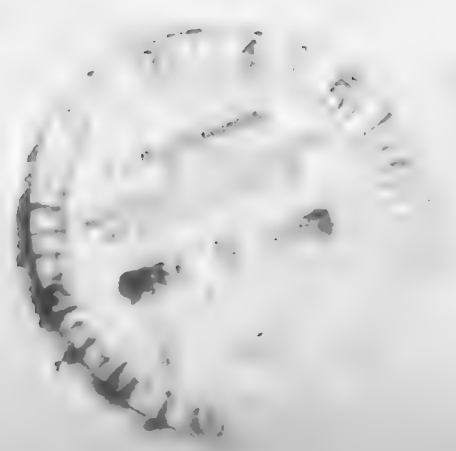
Stowaways. -

No. 12 - 114<sup>th</sup> St. New York, N.Y.  
 No. 169 Columbia St. Brooklyn, N.Y.  
 No. 223 Caroline St. - Baltimore, Md.  
 No. 223 Caroline St. Baltimore, Md.  
 No. 57 - E. 115<sup>th</sup> St. New York, N.Y.  
 No. 9 - West 114<sup>th</sup> St. New York, N.Y.

No. 12 - 114<sup>th</sup> St. New York, N.Y.  
No. 169 Columbia St. Brooklyn, N.Y.  
no. 223 Caroline St. - Baltimore, Md.  
no. 223 Caroline St. Baltimore, Md.  
no. 57 - E. 115<sup>th</sup> St. New York, N.Y.  
no. 9 - West 114<sup>th</sup> St. New York, N.Y.

- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
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  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number

10-40-1 "Amr."

S. S.

sailing from

19

Arriving at Port of

19

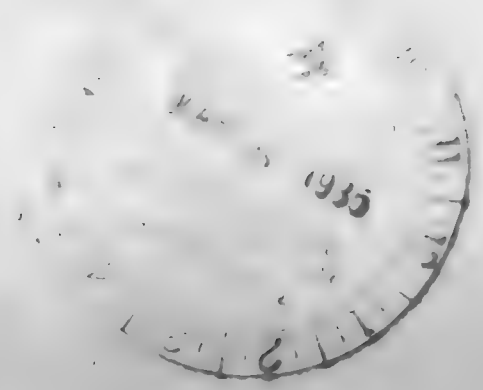
| No.<br>on<br>List | NAME IN FULL<br>FAMILY NAME GIVEN NAME | AGE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|----------------------------------------|-----|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------|
| 1                 |                                        |     | U.S. Passport # 1094                                                                                                                  |                                                                                                            |                          |
| 2                 |                                        |     | U.S. Passport # 116252                                                                                                                |                                                                                                            |                          |
| 3                 |                                        |     | then father                                                                                                                           |                                                                                                            |                          |
| 4                 |                                        |     | Lu B. Dolch -                                                                                                                         |                                                                                                            |                          |
| 5                 |                                        |     | U. S. IMMIGRANT INSPECTOR                                                                                                             |                                                                                                            |                          |
| 6                 |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 7                 |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 8                 |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 9                 |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 10                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 11                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 12                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 13                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 14                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 15                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 16                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 17                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 18                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 19                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 20                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 21                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 22                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 23                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 24                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 25                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 26                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 27                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 28                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 29                |                                        |     |                                                                                                                                       |                                                                                                            |                          |
| 30                |                                        |     |                                                                                                                                       |                                                                                                            |                          |

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## IMPORTANT NOTICE.

1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







CERTIFICATE IN LIEU OF LOST OR DESTROYED  
**DISCHARGE CERTIFICATE**



**To all Whom it May Concern:**

**Know ye, That**

*Shag Pshman* *6621433*  
a *Private* of *Company C*  
*Seventeenth Infantry*  
who was enlisted  
on the *twenty-first* day of *August*, one thousand *nine*  
hundred and *twenty-five*, at *Fort Hayes, Ohio*  
to serve for the period of *three years* was Honorably Discharged  
from the service of the United States on the *fourth* day of *October*  
one thousand *nine* hundred and *twenty-seven*, by reason of  
*Section VIII, Army Regulations 615-360*  
*Character good*

This Certificate is given under the provisions of the Act of Congress approved July 1, 1902,  
"to authorize the Secretary of War to furnish certificates in lieu of lost or destroyed discharges" to  
honorably discharged officers or enlisted men or their widows, upon evidence that the original discharge  
certificate has been lost or destroyed, and upon the condition imposed by said Act that this certificate  
"shall not be accepted as a voucher for the payment of any claim against the United States for pay,  
bounty, or other allowances, or as evidence in any other case."

Given at the War Department, Washington, D. C., this *fourth* day of  
*March*, one thousand nine hundred and *thirty-five*

By authority of the Secretary of War:

*The Adjutant General*  
Adjutant General

NOTE: This certificate is issued from the office of The Adjutant General of the Army without erasure. Any addition,  
alteration, or erasure made thereon is unauthorized.  
W. D., A. G. O. Form No. 0170-2  
October 1, 1933



CEB-47.

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON

IN REPLY  
REFER TO AG 201 Pashman, Shag  
(2-14-35) Enl.

March 5, 1935.

Mr. Shag Pashman,  
c/o American Consulate General,  
Lisbon, Portugal.

Dear Sir:

I have an application for a certificate in lieu of lost or  
destroyed discharge certificate for Shag Pashman who served in the  
Army as Shag Pashman, 6631433.

Inclosed herewith is a certificate in lieu of discharge certi-  
ficate.

Very truly yours,

*James F. H. H. H.*  
Major General,  
The Adjutant General,  
By *[Signature]*

1 Incl.  
W.D.A.G.O. Form No. 0150-2.

IN REPLY REFER TO  
FILE NO. 822 JBT/3.



DEPARTMENT OF STATE

AMERICAN CONSULAR SERVICE

Lisbon, Portugal, April 16, 1935.

Chief Inspector of Immigration,  
Chester or Philadelphia.

Sir:

I have arranged with the master of the Portuguese vessel  
"OLIBRA" to transport to the United States Mr. Shag Pashman  
(or Pashman), a destitute American seaman. This individual has  
no Seaman's identification documents nor has he an American  
passport, but I have given to the Captain for safe-keeping his  
"Certificate in Lieu of Lost or Destroyed Discharge Certificate",  
issued by the War Department on March 4, 1935, which should serve  
to identify him as an American citizen. This certificate was  
obtained upon application of Shag Pashman sworn to before an officer  
of this Consulate General. This office has also corresponded with  
his former guardian, Mr. Milton Murad, of 10 Hall Avenue, South  
Braintree, Massachusetts.

Respectfully yours,

*Carl A. Deichman*  
Carl A. Deichman,  
American Consul General.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

PORT *S.S. COIMBRA* sailing from *OPORTO, PORTUGAL* *4/18/30* , Arriving at Port of *PHILADELPHIA* *5/6/30, 19*

| No. | NAME IN FULL   | AGE         | SEX              | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                  |
|-----|----------------|-------------|------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------|
| 1st | Family Name    | Given Name  | Yes. Mos.        |                                                                                                                                    |                                                                                                        |                                           |
| 1   | <i>PASHMAN</i> | <i>SHAG</i> | <i>27/11 M S</i> | <i>Large + 1907 FEB 16 1937</i><br><i>Born South Brimfield Mass.</i><br><i>Adm'd as N. S. Citizen</i><br><i>June 17, 1920</i>      | <i>w/ 55933/327 dated Oct 17 1936</i><br><i>own file 4423-2737</i>                                     | <i>10 Hall Ave. South Brimfield Mass.</i> |
| 2   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 3   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 4   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 5   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 6   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 7   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 8   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 9   |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 10  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 11  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 12  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 13  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 14  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 15  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 16  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 17  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 18  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 19  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 20  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 21  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 22  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 23  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 24  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 25  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 26  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 27  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 28  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 29  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |
| 30  |                |             |                  |                                                                                                                                    |                                                                                                        |                                           |

*See letter of Carl F. Deichman, American Consul General, Lisbon, Portugal.*  
*Pashman signed return to Cape Cod County at Cape Cod, Mass. April 1920, described as born France May 1920.*  
*Has arrived in Steamship at South Brimfield.*

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- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
  2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_  
years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_  
in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note:—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an authorized officer at port of arrival, and any changes that may have occurred since issue of the certificate of discharge must be noted on the manifest for arriving aliens, if so required.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before an authorized local health officer.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which alien sprang and the language they speak. The original stock or blood shall be the basis of the classification; the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                   |
|------------------|-------------------|---------------------------------------------------|
| African (black). | Greek.            | Romanian.                                         |
| Armenian.        | Hebrew.           | Russian.                                          |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusniak).                              |
| Bosnian.         | Irish.            | Scandinavian (Norwegian,<br>Danish, and Swedish). |
| Bulgarian.       | Italian (North).  | Scotch.                                           |
| Chinese.         | Italian (South).  | Serbian.                                          |
| Croatian.        | Japanese.         | Slovak.                                           |
| Cuban.           | Korean.           | Slovenian.                                        |
| Dalmatian.       | Lithuanian.       | Spanish.                                          |
| Dutch.           | Magyar.           | Spanish American.                                 |
| East Indian.     | Mexican.          | Syrian.                                           |
| English.         | Montenegrin.      | Turkish.                                          |
| Finnish.         | Moravian.         | Welsh.                                            |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).                |
| French.          | Polish.           |                                                   |
| German.          | Portuguese.       |                                                   |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (white) sheet is for the listing of

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S. S. MANATAWNY *Manatany* Passengers sailing from FAJARDO, Porto Rico, May, 1935

| No. on List. | HEAD-TAX STATUS.<br><small>This column for use of Government officials only.</small> | NAME IN FULL       | Age.        | Sex.      | Calling or occupation. | Able to                  | Nationality.<br>(Country of which citizen or subject.)         | Race or people. | * Last permanent residence. | The name and complete address of nearest relative or friend in country whence alien came. | Final destination. |                                                                                       |
|--------------|--------------------------------------------------------------------------------------|--------------------|-------------|-----------|------------------------|--------------------------|----------------------------------------------------------------|-----------------|-----------------------------|-------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------|
|              |                                                                                      | Family name.       | Given name. | Yrs. Mos. | Married or single.     | Read. Write.             | Read what language (or, if exemption claimed, on what ground). |                 | Country.                    | City or town.                                                                             | State.             | City or town.                                                                         |
| 51           |                                                                                      | RUIZ               | CONCEPCION  | 33 5      | M S                    | LABORER                  | Yes English                                                    | Yes             | U. S.                       | SPANISH AMER. P. R.                                                                       | FAJARDO            | FATHER: CARLOS RUIZ, living at SANTIAGO ST. FAJARDO, P. R. N. Y. NEW YORK             |
| 52           |                                                                                      | AVILES (Y CORDOVA) | GENARO      | 22 -      | M S                    | DOCK LABORER             | Yes SPANISH                                                    | Yes             | U. S.                       | AFRICAN (BLACK) P. R.                                                                     | FAJARDO            | FATHER: FELIPE AVILES, living on beach front at FAJARDO, P. R. PA. PHILADELPHIA       |
| 53           |                                                                                      | FUENTES            | ALICEO      | 21 10     | M S                    | LABORER, SEAMAN (unpaid) | Yes ENGLISH                                                    | Yes             | U. S.                       | AFRICAN (BLACK) P. R.                                                                     | FAJARDO            | FATHER: TOMAS FUENTES, living on beach front at FAJARDO, P. R. N. Y. BROOKLYN         |
| 54           |                                                                                      | FELICHIANO         | SEGUNDO     | 25 10     | M Y                    | DOCK LABORER             | Yes SPANISH                                                    | Yes             | U. S.                       | SPANISH AMER. P. R.                                                                       | FAJARDO            | WIFE: TEREZA CARRILLO, MONSERRATTA ST. 475 C, SANTUCE, SAN JUAN, I. R. N. Y. BROOKLYN |
| 55           |                                                                                      | SANTIAGO           | CARMELO     | 21 6      | M Y                    | LABORER                  | N                                                              | NO              | NATIVE PORTO RICAN U. S.    | P. R.                                                                                     | FAJARDO            | WIFE: PAULA DE JESUS, CALLE PARK, SAN JUAN, P. R. N. Y. BROOKLYN                      |

See file 4399/49

5 persons released 5:18:35 PM by B's as natives Porto Rico U. S. citizens

Waiting in Imm Insp.

*unpaid*

See file 4399/49

5 persons released 5:35 PM '35' as natives Porto Rico U. S. citizens  
Letting's Imm Insp.

*many released*

Total passengers  
U. S. citizens  
Aliens

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of the alien at the time of departure.  
† List of races with 16 found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.  
STEERAGE PASSENGERS ONLY

Arriving at Port of PHILADELPHIA, PA., MAY 7, 1935

| 14          | 15                                                 | 16                        | 17                                                    | 18                                                                   | 19                                                                                                                                                                | 20                                  | 21                                                    | 22                                                    | 23                                                    | 24                                                    | 25                                                    | 26                                                    | 27                                                    | 28                                                       | 29                                                    | 30                                                    | 31                                                    | 32                                                    | 33                                                    |
|-------------|----------------------------------------------------|---------------------------|-------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| No. on List | Whether having a ticket to each final destination. | By whom was passage paid? | Whether in possession of \$50, and if less, how much? | Whether ever before in the United States; and if so, when and where? | Whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address.                                                | Purpose of coming to United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States.    | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. | Whether alien intends to remain in the United States. |
|             |                                                    |                           |                                                       | If yes—<br>Yes or No<br>Year or period of years.<br>Where?           |                                                                                                                                                                   |                                     |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       | Condition of health, mental and physical.             | Deformed or crippled. Nature, length of time, and cause. | Height.<br>Feet.<br>Inches.                           | Color of—<br>Hair.<br>Eyes.                           | Complexion.                                           | Marks of identification.                              | Place of birth.<br>Country.<br>City or town.          |
| 1           | No                                                 | STOWAWAY                  | NO                                                    | ARR. AS SEAMAN.                                                      | FRIENDS —<br>EMILIO MALDONADO &<br>JERONIMO ACOSTA<br>(same address unknown)<br>NEW YORK, N.Y.<br>BROTHER: RAFAEL AVILES,<br>1011 LOCUST ST.<br>PHILADELPHIA, PA. | Perm                                | No                                                    | No                                                    | No                                                    | No                                                    | No                                                    | No                                                    | Good                                                  | No                                                       | 5 2                                                   | Dark Black Br.                                        | Scars on left forearm & right knee                    | Porto Rico                                            | Fajardo                                               |
| 2           | No                                                 | STOWAWAY                  | NO                                                    | ARR. AS SEAMAN.                                                      | FRIEND: MARCELA FELICIANO,<br>50 CONGRESS ST.,<br>BROOKLYN, N.Y.                                                                                                  | Perm                                | Yes                                                   | Yes                                                   | No                                                    | No                                                    | No                                                    | No                                                    | Good                                                  | No                                                       | 6 4                                                   | Black Black Br.                                       | Scars on R. cheek & Port. knee                        | Porto Rico                                            | Fajardo                                               |
| 3           | No                                                 | STOWAWAY                  | NO                                                    | ARR. AS SEAMAN.                                                      | SISTER: MARCELA FELICIANO,<br>50 CONGRESS ST.,<br>BROOKLYN, N.Y.                                                                                                  | Perm                                | Yes                                                   | No                                                    | No                                                    | No                                                    | No                                                    | No                                                    | Good                                                  | No                                                       | 5 4                                                   | Black Black Br.                                       | Scars on left side & Port. knee                       | Porto Rico                                            | Fajardo                                               |
| 4           | No                                                 | STOWAWAY                  | NO                                                    | ARR. AS SEAMAN.                                                      | HAIR SISTER: MARCELA FELICIANO,<br>50 CONGRESS ST.,<br>BROOKLYN, N.Y.                                                                                             | Perm                                | Yes                                                   | No                                                    | No                                                    | No                                                    | No                                                    | No                                                    | Good                                                  | No                                                       | 5 6                                                   | Black Black Br.                                       | Scars on both arms & Port. knee                       | Porto Rico                                            | Fajardo                                               |
| 5           | No                                                 | STOWAWAY                  | NO                                                    | ARR. AS SEAMAN.                                                      |                                                                                                                                                                   | Perm                                | Yes                                                   | No                                                    | No                                                    | No                                                    | No                                                    | No                                                    | Good                                                  | No                                                       | 5 5                                                   | Black Black Br.                                       | Scars on right forearm & Port. knee                   | Porto Rico                                            | Fajardo                                               |
| 6           | NOTE: The stowaways Segundo Feliciano &            |                           |                                                       |                                                                      |                                                                                                                                                                   |                                     |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                          |                                                       |                                                       |                                                       |                                                       |                                                       |
| 7           | Carmelo Santiago have same father but different    |                           |                                                       |                                                                      |                                                                                                                                                                   |                                     |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                          |                                                       |                                                       |                                                       |                                                       |                                                       |
| 8           | mothers.                                           |                           |                                                       |                                                                      |                                                                                                                                                                   |                                     |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                       |                                                          |                                                       |                                                       |                                                       |                                                       |                                                       |

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Note: Full text of question 24 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States, or of any State, or of any insular possession, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assassination or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, do  
(State whether Master [First or Second Officer])  
solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own  
investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in  
said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

*Officer.*

*Immigration Officer.*

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (Head to tail) = Steamship line should make no change in this column. The reason is for need of transportation to the ocean.

Column 4 ( $\beta_1$ )—The mean for  $\beta_1$  in this column should be a constant 1.0 given by equation (1). The latter hypothesis and  $\beta_1$  both use the same  $\beta_1$  of  $\beta_2$ .

Column 6) *Married or single*—The answer should be M (married) or S (single).

[illegible]

A different way could be made by using the following lemma:

• A *strongly* *reducible* *l*-manifold has a *l*-factor and *l* factor hypersurfaces, regardless of the amount of *m*-manifolds, as follows:

1) the name, b) the address and residence of the person who prepared examination of alien arrivals.

Chomsky S. *Take the good with you*. "Take the good with you" is embedded and contains the following question: "But what happens for if expressions are embedded, aren't what you get?" In answering this question, the meaning of the good is then made to float – and host itself. If then is unable to float and stays. As a result, there is no floating movement. The good – for each expression – will be given.

Column 9: *Accession date* - Question 9 should be completed to mean the country of which China is a member of society.

Column 10: *Accession date* - Number of years printed on back of this sheet. The entry should show the year of publication in the original language.

Several authors should be noted in the literature between race and the country of which citizens or subject countries of host permanent residence and country of birth, and residents should be especially noted by those interested positive works in this regard. For instance, "Citizens" appearing under the heading of "Race" in the *Journal of Applied Social Psychology* (1968) by J. H. Turner and J. H. Turner, and "Race" appearing under the heading of "Citizens" in the *Journal of Applied Social Psychology* (1968) by J. H. Turner and J. H. Turner.

1. Following these instructions, French, by race or people, and, similarly, French, appearing under the heading of people, should not mean: France, by country. An Irish, German, or Hebrew name by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following directions should be especially observed:

The term "Cham" refers to the native people of Kongs.

<sup>a</sup>West Indians. refers to the people of the West Indies, and then either Caribbees or Negroes.

<sup>2</sup> Spanish Americans and for the people of Central and South America of Spanish descent.

\*African (black) refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South American, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

HEAVY TAN 500000

[illegible]

DATA SOURCE

The results also indicate that position of Italy within the known world (Fig. 1) is important in the development of the Mureno, the Marone, the Tevere, the Arno, and the Po. As the Etruscans, Umbrians, Latins, and Romans moved into Italy, the Mureno, the Marone, the Tevere, the Arno, and the Po were the first rivers to be dammed. The Tevere, the Arno, and the Po were the first rivers to be navigated. The Mureno, the Marone, the Tevere, the Arno, and the Po were the first rivers to be dammed and navigated. The Mureno, the Marone, the Tevere, the Arno, and the Po were the first rivers to be dammed and navigated.

[illegible]

Consider the last part of our problem. If  $\mathbf{A}$  is a  $n \times n$  matrix, we can represent  $\mathbf{A}$  as a  $2 \times 2$  block matrix, and so redefining  $\mathbf{A}$  as  $\mathbf{A} + \mathbf{A}^T$ , we can assume  $\mathbf{A}$  is symmetric.  $\square$

Table 14. *U. luteolus* (question 1). The mean number of months of residence in the United States and the mean number of months of residence in the United States for the past year for the respondents. The mean number of months of residence in the United States for the respondents is significantly different from the mean number of months of residence in the United States for the respondents who are not residents of the United States.

[illegible]

(4) Lemma 11. If  $S$  is a  $p$ -group and  $p \nmid n$ , then  $S$  is a  $p$ -group. The lemma should be deduced by using the fact that  $S$  is a  $p$ -group and that  $S$  is a  $p$ -group. (The lemma should be deduced by using the fact that  $S$  is a  $p$ -group and that  $S$  is a  $p$ -group.)

not be divided among the several members of the family.

Publication 18, 1875, *for sale between the United States and Great Britain and France*. The authors do not show whether or not (Yes or No) to the United States before, and if so, the exact period, years, and place, i.e., 1860-1876, Philadelphia.

<sup>1</sup> column 19 (If *both* going to see relative or friend and *you*, what relative or friend?); <sup>2</sup> column 20 to 23 – These questions are self-explanatory, and the answer, 'the' (referring to the day);

question 26, if alien has been deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



## FOR THE IMMIGRATION AUTHORITIES

## Sailing from

Constitutional Zone

April 29, 1955

1900, Arriving at Port of

12

19

- 53 -

**IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.

2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.

3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.

4. List on this form only United States citizens or citizens of an insular possession of the United States.

16-5031







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
years' experience as a Physician  
and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before a civil or naval officer at port of arrival, and any changes that may have occurred on voyage  
there, before re-embarkation of the passengers must be noted on the manifest before the affidavit is sworn to.  
If a surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure, before a civil or naval officer, and any changes that may have occurred on voyage  
there, before re-embarkation of the passengers must be noted on the manifest before the affidavit is sworn to.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                |                   |                                                  |
|----------------|-------------------|--------------------------------------------------|
| African—black. | Greek.            | Roumanian.                                       |
| Armenian.      | Hebrew.           | Russian.                                         |
| Bohemian.      | Herzegovinian.    | Ruthenian (Russiaks).                            |
| Bosnian.       | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.     | Italian (North).  | Scotch.                                          |
| Chinese.       | Italian (South).  | Servian.                                         |
| Croatian.      | Japanese.         | Slovak.                                          |
| Cuban.         | Korean.           | Slovenian.                                       |
| Dalmatian.     | Lithuanian.       | Spanish.                                         |
| Dutch.         | Magyar.           | Spanish American.                                |
| East Indian.   | Mexican.          | Syrian.                                          |
| English.       | Montenegrin.      | Turkish.                                         |
| Finnish.       | Moravian.         | Welsh.                                           |
| Flemish.       | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.        | Polish.           |                                                  |
| German.        | Portuguese.       |                                                  |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the Bureau of Immigration, and shall be required to furnish to the Bureau of Immigration, for the purpose of such examination, the following information:

Br. —STOWAWAY— This pink sheet is for the listing of

—STOWAWAY—

~~Passenger~~ sailing from ALVARO OBREGON,  
MEXICO

MAY 4, 1935

|                            |       |
|----------------------------|-------|
| Total passengers . . . . . | 1,000 |
| U. S. citizens . . . . .   | 1,000 |
| Aliens . . . . .           | 1,000 |

\* Permanent residence within the meaning of this manifest shall be ascertained by the total residence of the alien in the United States.



## List

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA, Pa. , MAY 9 , 1935

[illegible]

<sup>10</sup> Note: Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who believes in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of, or affiliated with, or is a member of, or teaches in or is opposed to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the destruction, assassination, or property of the unlawful assembly, or the killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."

| Line | Owners | Local Agents |
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| 100  |        |              |



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, T. Rescod, of the S.S. Oriskany, from Alvaro Oregon, do solemnly, sincerely, and truly declare that I have caused the master of said vessel sailing therewith, or the surgeon employed by the owner thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, One in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

T. Rescod  
Master Officer.

Sworn to before me this 9th day of May, 1935,  
at Philadelphia, Pa.

Lee B. F. Galt  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class, and the so-called tourist class, whose visas bear the initials of Technical Adviser, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Headline status*).—Steamship lines should make no entries in this column. The space is for use of Government officers only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be either M (male) or F (female).

Column 6 (*Married or single*).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example, Civil engineer, machinery engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money received, as follows:

A farmer—One who operates a farm, either for himself or for others.

A farm laborer—One who works on a farm for the man who operates it.

Steamship and other lines should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien passengers.

Column 8 (*Ability to read and write*).—This column is subdivided and contains the following question: "Read alien language?" If, upon examination, it is found that the alien is unable to read, the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the correct French exemption should be given.

Column 9 (*Nationality*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which alien or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (and Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (NEGRO)

"African (Negro)" refers to the African Negro, whether coming from China or other countries of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (north)."

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*).—Prefix serial number of document with abbreviation "GIV," "NAV," "T," or "R" as appropriate, to designate whether it is Green Immigration Visa, Navajo Immigration Visa, Passport Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1924 involved, as follows:

Column 13.—This question has reference to the place and date of issue of the document described in column 12 and is self-explanatory.

Column 14 (*Intention of landing, etc.*).—Steamship lines should make no entries in this column. The space is for use of Government officers only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as "United States."

Column 17 (*Name and complete address of nearest relative or friend in United States*).—The entry should give name, exact relationship, and complete address of each relative. If no such relative living, give name and address of nearest relative or friend living in country of which alien came, give name and address of relative or friend in country of which alien came, or, if such country is other than that whence alien came, address should include street and number.

Column 18 (*Land destination*).—The answer to this question should show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town, of intended future permanent residence, if within the United States; country, if outside the United States, and year of intended departure.

Column 19 (*Whether having a ticket to such final destination*).—The answer should be (a) either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show, as to whom passage was paid, as self, husband, father, brother, or other relative, name of steamship company, etc.

Column 21 (*Whether in possession of \$50, and if less, how much*).—The answer should give, in each case (individual or family), the exact amount of money, money brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States and if so, when, place, and date of last departure*).—The entries should show whether or not alien or family has been in the United States before; and if so, the year for period of entry and departure. "Before" means Philadelphia. Where in the United States more than once previously, indicate the date only, and give exact or approximate date of last departure from the United States.

Column 23 (*Who they go to join relative or friend*).—The answer should show whether going to join relative or friend, with name and complete address, if a relative, the exact relationship.

Columns 24 to 26.—These questions are self-explanatory and the answers should be given on the sheet, are subject to revision by inspection officers in the event of change of address. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

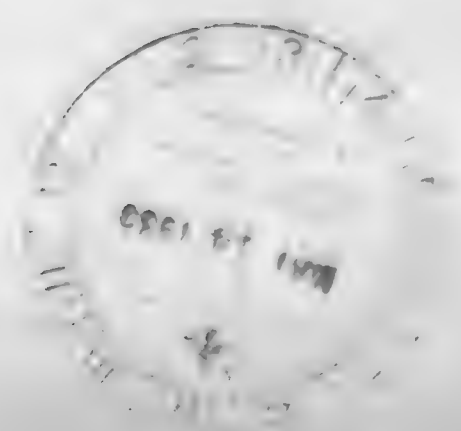
*19. S.* "Darien" sailing from *Pto. Barrios, Guatemala*, May 5th., 1935, Arriving at Port of Philadelphia Pa *via Charleston S.C.* 9 May 12th./35

| No.<br>on<br>List | NAME IN FULL   |                | AGE<br>Yrs. Mos. | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                 |
|-------------------|----------------|----------------|------------------|-----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------|
|                   | FAMILY NAME    | GIVEN NAME     |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 1                 | <i>Knutson</i> | <i>O. Emil</i> | 25 5             | S   | <i>Nov. 16th. 1909 Rockport Mass.</i>                                                                                                    | <i>1st Nat. Court, Jan 4/35</i>                                                                              | <i>4, Myrtle Square, Gloucester Mass</i> |
| 2                 |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 3                 |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
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| 8                 |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 9                 |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 10                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
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| 13                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 14                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 15                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 16                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 17                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 18                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 19                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 20                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 21                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 22                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 23                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 24                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 25                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 26                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 27                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 28                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 29                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |
| 30                |                |                |                  |     |                                                                                                                                          |                                                                                                              |                                          |

Line *Under No. 1*  
Owners *1st*  
Local Agents

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



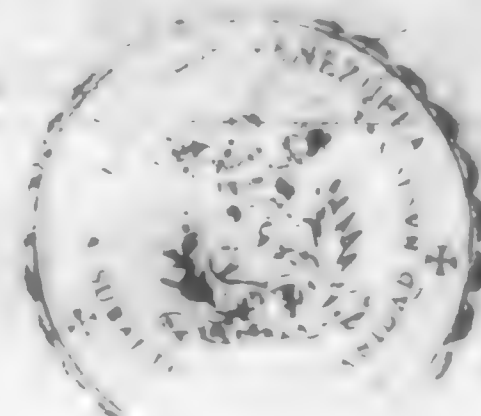
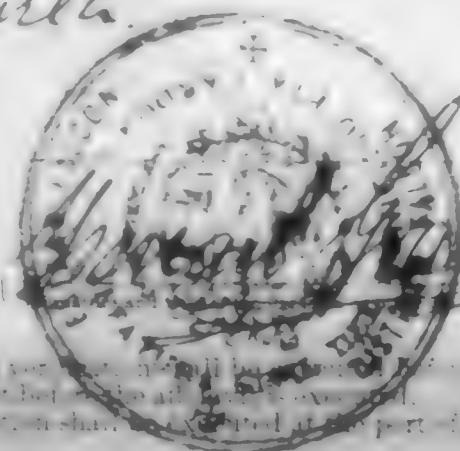




# AFFIDAVIT OF SURGEON

I, George L. L., Surgeon of the Venezuela Govt, do  
 solemnly, sincerely, and truly swear that I have had five  
 and Surgeon, and that I am entitled to practice as such by and under the authority of Venezuela Govt  
 , and that I have made a personal examination of  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets,  
 in number, according  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this 5<sup>th</sup> day of May, 1935  
 at Los Portales, Venezuela



Note.—If a surgeon sails with the vessel, this affidavit of jurisdiction shall be filed with the manifest and shall be retained by the surgeon until the vessel has arrived at its destination, and then it shall be filed with the manifest. If no surgeon sails with the vessel, the affidavit of jurisdiction shall be filed with the manifest at the port of destination before the vessel has arrived at its destination.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                |                   |                                                  |
|----------------|-------------------|--------------------------------------------------|
| African—black. | Greek.            | Romanian.                                        |
| Armenian.      | Hebrew.           | Russian.                                         |
| Bohemian.      | Herzegovinian.    | Ruthenian (Russink).                             |
| Bosnian.       | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.     | Italian (North).  | Scotch.                                          |
| Chinese.       | Italian (South).  | Servian.                                         |
| Croatian.      | Japanese.         | Slovak.                                          |
| Cuban.         | Korean.           | Slovenian.                                       |
| Dalmatian.     | Lithuanian.       | Spanish.                                         |
| Dutch.         | Magyar.           | Spanish American.                                |
| East Indian.   | Mexican.          | Syrian.                                          |
| English.       | Montenegrin.      | Turkish.                                         |
| Finnish.       | Moravian.         | Welsh.                                           |
| Flemish.       | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.        | Polish.           |                                                  |
| German.        | Portuguese.       |                                                  |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and shall be admitted to the United States only if they are found to be admissible under the laws of the United States.

2576

S. S. Am. M.S. Gulfbird

*Passengers sailing from* **Las Piedras, Venezuela.**

May  
~~June~~ 6th 1935

19

|                            |   |
|----------------------------|---|
| Total passengers . . . . . | 3 |
| U. S. citizens . . . . .   | 0 |
| Aliens . . . . .           | 3 |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia Pa.

May 13th 1936

19

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(Indicate full permanent residence)</small> | By whom was passage paid? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow of the Government of the United States or of all forms of law, or who is affiliated with any organization entertaining and teaching such beliefs or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assassination or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of<br>Hair<br>Eyes | Marks of identification |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|--------------------------|-------------------------|
| 1           | George Eichelbaum<br>Berlin,<br>47 Motzst. (Father)<br>Germany.                                                                                            | N                                                                       | Y                         | Yes                                                                  | Feb. 1929<br>George Eichelbaum<br>47 Motzst.<br>Berlin,<br>Germany                                               | 10 days<br>In-Transit              | N                    | N                    | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Good                                     | No                                                      | 5 6                      | Fair                     | None                    |
| 2           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 3           | Ditto                                                                                                                                                      | Do.                                                                     | Do.                       | Y                                                                    | Do.                                                                                                              | Ditto                              | N                    | N                    | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Good                                     | No                                                      | 5 5                      | Fair                     | None                    |
| 4           | Ditto                                                                                                                                                      | Do.                                                                     | Do.                       | Y                                                                    | Do.                                                                                                              | Ditto                              | N                    | N                    | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Good                                     | No                                                      | 2 4                      | Fair                     | None                    |
| 5           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 6           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 7           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 8           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 9           |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 10          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 11          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 12          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 13          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 14          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 15          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 16          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 17          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 18          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 19          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 20          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 21          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 22          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 23          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 24          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 25          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 26          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 27          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 28          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 29          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |
| 30          |                                                                                                                                                            |                                                                         |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                         |                          |                          |                         |

- 56 -

Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who is affiliated with any organization entertaining and teaching such beliefs or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assassination or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.







Form 400  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION AND NATURALIZATION SERVICE

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

## LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

"Amer."

S. S. ESPARTA

sailing from T. F. LA

Honduras

9TH OF MAY

1935

ARRIVAL AT CHARLESTON MAY 13TH. 1935

Arriving at Port of PHILA. VIA CHARLESTON MAY 15TH. 1935

Philadelphia, Pa. May 15, 1935

| No.<br>ON<br>List | NAME IN FULL |                    | AGE  | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                       |
|-------------------|--------------|--------------------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME         |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 1                 | JEWETT       | LYDIA Cloward      | ✓ 37 | 11  | F                    | M                                                                                                                                        | MAY 20TH. 1897 WASHINGTON D.C.                                                                               | 48 CUSHING ST. FREDONIA N.Y.                                   |
| 2                 | JEWETT       | RACHEL A.          | ✓ 10 | 3   | F                    | CHILD                                                                                                                                    | JAN. 27TH. 1925, WILMINGTON DEL.                                                                             | " " " " "                                                      |
| 3                 | JEWETT       | JEAN C.            | ✓ 6  | 2   | F                    | "                                                                                                                                        | MAY 11TH. 1929, HOLLYWOOD CALIF.                                                                             | " " " " "                                                      |
| 4                 | BATES        | Drell<br>A VABSTON | ✓ 28 | 9   | M                    | S                                                                                                                                        | U.S. Passport # 119716<br>JULY 23RD. 1906, GRAN RAPIDS MICH.                                                 | Harvard University<br>MUSEUM OF COMP. ZOOLOGY, CAMBRIDGE MASS. |
| 5                 |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 6                 |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 7                 |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 8                 |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 9                 |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 10                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 11                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 12                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 13                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 14                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 15                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 16                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 17                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 18                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 19                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 20                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 21                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 22                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 23                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 24                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 25                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 26                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 27                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 28                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 29                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |
| 30                |              |                    |      |     |                      |                                                                                                                                          |                                                                                                              |                                                                |

Lee B. Dolch -

U. S. IMMIGRANT INSPECTOR

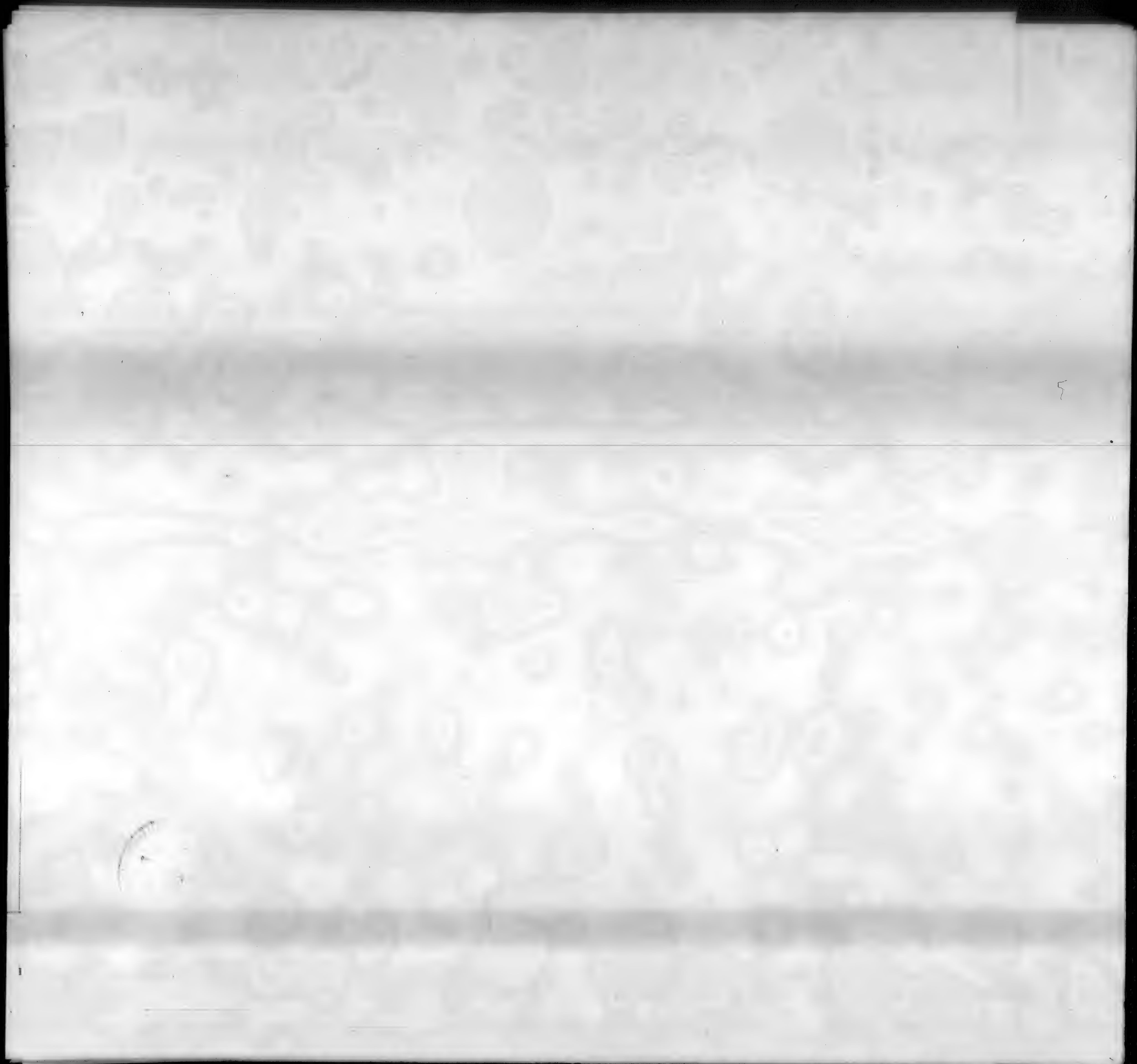
Standard Fruit Co.,  
Pier 5 North,  
Philadelphia, Pa.

MASTER

Line UNITED FRUIT COMPANY  
Owners UNITED FRUIT COMPANY  
Local Agents UNITED FRUIT COMPANY

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







(FOR THE IMMIGRATION AUTHORITIES)

S. S.

## Sailing from

May 11, 1921, Arriving at Port of

MAY 17 1936

May 17, 1935-92

|    |
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Josefa Bigles d.

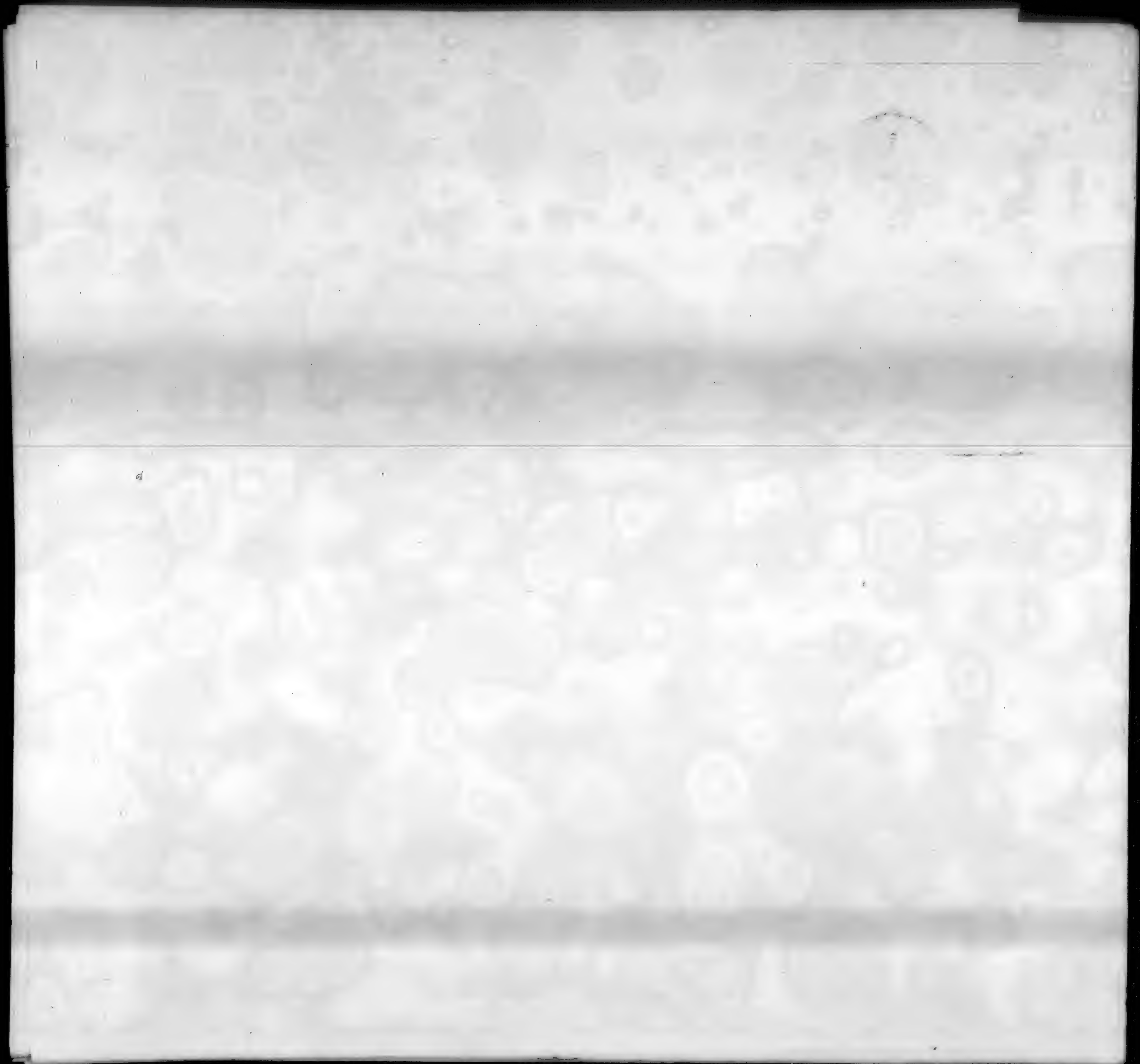
Lee B. Dolch,  
U. S. IMMIGRANT INSPECTOR

Wm. H. Landrum

58

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_ and that I have made a personal examination of \_\_\_\_\_  
each of the aliens named herein, and that the foregoing Lists of Manifest Subjects, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

*See medical certificate pasted on reverse side*

NOTE.—If a surgeon sails with the vessel, this affidavit of certification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the true and correct copy of the affidavit, if executed.  
If no surgeon sails with the vessel, the affidavit of certification shall be executed at the port of departure before some other authorized officer en route.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusnian).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3577

*Spain m/s*  
*S. M. Mar Cantabria*

Passengers sailing from *Huelva*


*May 3*

1936

| 1           | 2                                                                     | 3                   | 4          | 5    | 6    | 7    | 8                     | 9        | 10                                                   | 11    | 12                                                 | 13             | 14             | 15                                        |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
|-------------|-----------------------------------------------------------------------|---------------------|------------|------|------|------|-----------------------|----------|------------------------------------------------------|-------|----------------------------------------------------|----------------|----------------|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|-------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL        |            | Age  |      | Sex  | Calling or occupation | Able to— |                                                      |       | Nationality, (Country of which citizen or subject) | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number<br>(Prefix number with JAN, NOV, FY, or FY and give section if not involved) | Issued       |           | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) | Last permanent residence |                                           |
|             |                                                                       | Family name         | Given name | Yrs. | Mos. |      |                       | Read     | Read what language (or if competent, on what ground) | Write |                                                    |                | Country        | City or town, State, Province or District |                                                                                                                                        | Place        | Date      |                                                                                                       | Country                  | City or town, State, Province or District |
| 1           | Special Deposit                                                       | Traguine (Aldasola) | Modesto    | 37   | 8    | Male | Sheep Herder          | yes      | Spanish                                              | yes   | Spaniard                                           | Spanish        | Vicaya Spain   | Blanchore                                 | 1914 #22                                                                                                                               | Bilbao Spain | 26-3-1935 |                                                                                                       | Spain                    | Lequipo                                   |
| 2           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 3           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 4           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 5           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 6           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 7           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 8           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 9           |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 10          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 11          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 12          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 13          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 14          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 15          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 16          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 17          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 18          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 19          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 20          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 21          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 22          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 23          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 24          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 25          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 26          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 27          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 28          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 29          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |
| 30          |                                                                       |                     |            |      |      |      |                       |          |                                                      |       |                                                    |                |                |                                           |                                                                                                                                        |              |           |                                                                                                       |                          |                                           |

See file 4399/51. Excluded by BSI & appealed  
H. H. H.  
Imm. Insp.  
Excluding decision affirmed by Department 5/22.  
Alien removed from Detention House 5/23/35 for deportation.

S. L. Burgess & Co., Agents.  
Head Tax Bill # 283106  
Dated 5/22/35  
m2g


  
El Director de Sanidad exterior  
del Puerto de Huelva  
CERTIFICO:— Que reconocido S. Modesto  
Traguine Aldasola de 38 años de edad, natu-  
ral de Blanchore (Vicaya), no padece enfer-  
medad infecto-contagiosa, ni defectos graves  
  
Y para que así pueda constar donde convenga  
firmo la presente en  
Huelva 28 de Abril de 1935  


*See file 4399/51. Excluded by BSI & appealed*

*Imm. Insp.*  
*Excluding decision affirmed by Department 5/22.*  
*Alien removed from detention house 5/23/36 for deportation.*

*S. L. Burgess & Co. Agents*

*Head Tax Bill # 283106*  
*Dated 5/27/36*  
*MDG*




El Director de Sanidad exterior  
del Puerto de Huelva

CERTIFICO:— Que reconocido *E. Modesto*  
*Traguine Aldasola* de 38 años de edad, natu-  
ral de *Blanchore (Vicaya)*, no padece enfer-  
medad infecto-contagiosa, en defecto previo

Y para que así pueda constar donde convenga  
firmo la presente en

Huelva 28 de *Junio* de 1936

 *13106*

Total passengers . . . . .  
U. S. citizens . . . . .  
Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION

States, or a part of another insular possession  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

List

3517

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port

Spain mfg  
S. M. "Canta Briso"

Passengers sailing from Huelva

May 3

| Passengers sailing from <u>Huelva</u> , May 3 |                                                                                                                                              |             |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------|--------------------|------------|------|------|------|-------------------|-----------------------|----------|--------------------------------------------------------------|------------------------------------------------------|----------------|----------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------|----------|--------------|-------------------------------------------------------------------------------------------------------|--|
| No. on List                                   | The name and complete address of relative or friend in country whence came, or if none there, then in country of which a citizen or subject. | No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL       |            | Age  |      | Sex  | Married or single | Calling or occupation | Able to— |                                                              | Nationality<br>(Country of which citizen or subject) | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reciprocity Permit number<br>(This column for use of Government officials only) | Issued   |              | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) |  |
|                                               |                                                                                                                                              |             |                                                                       | Family name        | Given name | Yrs. | Mos. |      |                   |                       | Read     | Read what language (or if exception claimed, on what ground) | Write                                                |                | Country        | City or town, State, Province or District |                                                                                                                     | Place    | Date         |                                                                                                       |  |
| 1                                             | Bruno Mono Liguiera<br>Redel Creek, Nevada                                                                                                   | 1           | Special<br>Deposit                                                    | Laguiera (Widawls) | Modesto    | 37   | 8    | Male | Married           | Sheep Herder          | yes      | Spanish                                                      | yes                                                  | Spaniard       | Spanish        | Vicaya<br>Spain                           | Blanchos                                                                                                            | 1914 #22 | Bilbao Spain | 26-3-1915                                                                                             |  |
| 2                                             |                                                                                                                                              | 2           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 3                                             |                                                                                                                                              | 3           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 4                                             |                                                                                                                                              | 4           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 5                                             |                                                                                                                                              | 5           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 6                                             |                                                                                                                                              | 6           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 7                                             |                                                                                                                                              | 7           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |
| 8                                             |                                                                                                                                              | 8           |                                                                       |                    |            |      |      |      |                   |                       |          |                                                              |                                                      |                |                |                                           |                                                                                                                     |          |              |                                                                                                       |  |

See file 4399/51. Excluded by BSI & appealed  
Hasting  
Imm. Insp.  
Excluding decision affirmed by Department  
Alien removed from detention house & for  
deportation.

S. L. Burgess & Co., Agents.

Head Tax Bill #283106  
Dated 5/2/1917  
m2g

Spanish Republic  
Province and city of Sevilla  
Consulate of the United States of America } SS.  
John B. Ocheltree, Vice Consul of the United  
States of America at Sevilla, Spain, duly commissioned and qualified, do hereby  
certify that Mr. Romero Blanco  
whose signature and official seal are respectively subscribed and affixed to the  
foregoing document was on the 28th day of April, 1915 Director of the  
Exterior Sanitary Station of the Port of  
Huelva, Spain.  
Witness my hand and official seal this 29th  
day of April, 1915.  
JOHN B. OCHELTTREE  
VICE CONSUL of the United States of America.  
Fee No. 254.  
U.S. Currency \$ 2.00  
Pencils 15.20

AMERICAN  
FEB 29 1915  
FEB 29 1915

See file 4399/51. Excluded by BSA & appealed

Excluding decision affirmed by Department  
Alien removed from detention house & deportation

S. L. Burgess & Co. Agents

Head Tax Bill # 283106  
Dated 5/2/13  
m2g

Spanish Republic  
Province and city of Sevilla  
Consulate of the United States of America } SS.  
John B. Ooheltree, Vice Consul within United  
States of America at Sevilla, Spain, duly commissioned and qualified, do hereby  
certify that Mr. Romero Blanco  
whose signature and official seal are respectively submitted and affixed to the  
foregoing document was on the 28th  
day of April 1915 Director of the  
Exterior Sanitary Station of the Port of  
Huelva,  
Witness my hand and official seal this 29th  
day of April 1915  
JOHN B. OOHELTREE  
VICE CONSUL of the United States of America  
Fee No. 234  
U. S. Currency \$ 2.00  
Pounds 15.20



Note.—Full text of question  
or who disbelieves in or is opposed  
to or affiliated with any organization  
the duty, necessity, or propriety of  
other organized government body

Total passengers . . . . .  
U. S. citizens . . . . .  
Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this form.

3577

S. M. "Mar. Centaurus"

Passengers sailing from *Huelva*

, 11/11/11

, 1936

| 1           | 2                                                                     | 3                   | 4          | 5    | 6    | 7    | 8                     | 9       | 10                                                           | 11    | 12                                                 | 13             | 14             | 15                                        |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
|-------------|-----------------------------------------------------------------------|---------------------|------------|------|------|------|-----------------------|---------|--------------------------------------------------------------|-------|----------------------------------------------------|----------------|----------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------|-----------|-------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL        |            | Age  |      | Sex  | Calling or occupation | Able to |                                                              |       | Nationality. (Country of which citizen or subject) | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number (If IV, NOIV, PV, or RP and give section of act involved) | Issued        |           | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) | *Last permanent residence |                                           |
|             |                                                                       | Family name         | Given name | Yrs. | Mos. |      |                       | Read    | Read what language (or if exemption claimed, on what ground) | Write |                                                    |                | Country        | City or town, State, Province or District |                                                                                                                     | Place         | Date      |                                                                                                       | Country                   | City or town, State, Province or District |
| 1           | Special                                                               | Laaguine (Wladawlo) | modesta    | 37   | 8    | Male | Sheep herder          | yes     | Spanish                                                      | yes   | Spaniard                                           | Spanish        | Viscaya        | Llanthorpe                                | NOIV #22                                                                                                            | Bilbao, Spain | 26-3-1935 |                                                                                                       | Spain                     | Lequipo                                   |
| 2           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 3           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 4           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 5           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 6           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 7           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 8           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 9           |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 10          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 11          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 12          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 13          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 14          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 15          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 16          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 17          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 18          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 19          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 20          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 21          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 22          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 23          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 24          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 25          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 26          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 27          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 28          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 29          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |
| 30          |                                                                       |                     |            |      |      |      |                       |         |                                                              |       |                                                    |                |                |                                           |                                                                                                                     |               |           |                                                                                                       |                           |                                           |

See file 4399/51. Excluded by BSI & appealed  
 Excluding decision affirmed by court  
 Imm. Insp.

Excluding decision affirmed by court  
 Alien removed from detention house & 330 for deportation.

El Director de Inmigración exterior  
 del Puerto de Huelva  
 CERTIFICA: Que el Sr. D. Laaguine (Wladawlo) Modesta  
 y su familia, de nacionalidad española, han sido admitidos  
 en el Puerto de Huelva, el día 26 de marzo de 1935.

En esta que así pueda constar donde convenga  
 firmo y sello en  
 Huelva a 26 de marzo de 1935

J. L. Burgess & Co. Agents.

Head Tax Bill # 283196  
 Date 5/27/34  
 M. J. G.

U. S. citizens . . . . .

Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_ and that I have made a personal examination of \_\_\_\_\_  
each of the aliens named herein, and that the foregoing Lists of Manifest Ships, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an authorized official at port of arrival, and any changes that may have occurred en route in  
the condition of any of the aliens must be noted on the affidavit before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized official.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and  
the language they speak. The original stock or blood shall be the basis of the classi-  
fication, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Roumanian.                                       |
| Armenian.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russink).                             |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of *Philadelphia* *May*, *1935*

| 16          | 17                                                                                                                                                         | 18                                                                         | 19                                          | 20                                                   | 21                                                                                                                                                                                                      | 22                                                    | 23                                                                                                         | 24                      | 25              | 26                                                                                                               | 27                                 | 28                                                   | 29                                                   | 30                                                   | 31                                                   | 32                                                   | 33                                                   | 34                                                   | 35                                                   | 36                                                   | 37                                                   |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------|-----------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|------------------------------------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>*Intended ultimate permanent residence</small> |                                             | Whether alien has a ticket to such final destination | By whom was passage paid?<br><small>Whether alien paid for own passage, whether paid by relative, whether paid by any other person or by any corporation, society, municipality, or government.</small> | Whether in possession of \$20. and if less, how much? | Whether ever before in the United States, and if so, when and where?<br><small>Last residence only</small> |                         |                 | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States |                                                      | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States |                                                      |                                                      |                                                      |                                                      |                                                      |
|             |                                                                                                                                                            | Foreign country via port of departure                                      | In U. S. A., its territories or possessions |                                                      |                                                                                                                                                                                                         |                                                       | Yes or No                                                                                                  | Year or period of years | Where?          |                                                                                                                  | Date of last departure             | Whether alien intends to remain in the United States |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States | Whether alien intends to remain in the United States |
|             |                                                                                                                                                            | State                                                                      | City or town                                |                                                      |                                                                                                                                                                                                         |                                                       | Yes or No                                                                                                  | Year or period of years | Where?          | Date of last departure                                                                                           |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 1           | Bruno Mano Esquiaga<br>Rebel Creek, Nevada                                                                                                                 | <i>Hawaii</i>                                                              | <i>Nevada</i>                               | <i>Rebel Creek</i>                                   | <i>yes</i>                                                                                                                                                                                              | <i>yes</i>                                            | <i>yes</i>                                                                                                 | <i>yes</i>              | <i>18 years</i> | <i>Nevada</i>                                                                                                    | <i>28-11-93</i>                    | <i>Paul Esquiaga, Ranch and Company</i>              | <i>Rebel Creek, Nevada</i>                           | <i>no</i>                                            | <i>no</i>                                            | <i>no</i>                                            | <i>no</i>                                            | <i>yes</i>                                           | <i>no</i>                                            | <i>no</i>                                            | <i>good</i>                                          | <i>no</i>                                            | <i>5'5 1/2</i>                                       | <i>Medium</i>                                        | <i>Ambr</i>                                          | <i>Ambr</i>                                          | <i>Prominent scar on right (back) side of neck</i>   |
| 2           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 3           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 4           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 5           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 6           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 7           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 8           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 9           |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 10          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 11          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 12          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 13          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 14          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 15          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 16          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 17          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 18          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 19          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 20          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 21          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 22          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 23          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 24          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 25          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 26          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 27          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 28          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 29          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |
| 30          |                                                                                                                                                            |                                                                            |                                             |                                                      |                                                                                                                                                                                                         |                                                       |                                                                                                            |                         |                 |                                                                                                                  |                                    |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |                                                      |

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Note - Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization advocating and teaching rebellion in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assassination or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government, because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Frederick, of the Mar Cantabris, from \_\_\_\_\_, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Frederick  
Master  
Officer.

Sworn to before me this 15 day of May, 1932

at Philadelphia

George  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1921; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisor, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head of state).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M (male) or F (female).

Column 5 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, electrician, engineer, locomotive engineer, marine engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply his engineer, polisher, molder, turner, or other indefinite designation.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language for, if exemption is claimed, upon what ground?" To answer this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject. Country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and similarly "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (SOUTH)

The people who are native to the basin of the River Po in northern Italy (i.e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i.e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)." The State, Province, or District of birth should be shown in relation to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "IV," "N IV," "IV," or "IV," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Entry Permit (and also state section of the Immigration Act of 1921 involved, as Section 4 (a)).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Intention of last trip).—Entries should be made in this column in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Answer as to last permanent residence of one year shall constitute permanent residence. This last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entry in column 15 should show the country, city or town, state, province or district of last permanent residence. It is important for statistical purposes that steamship companies' manifests show country of last permanent residence, independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 16 (Name and complete address of nearest relative residing in country of alien).—The entry should give name, exact residence, and address of nearest relative of such relative. If no such relative living, give name and address of nearest relative of relative or friend living in country of alien, give name and address of that relative or friend. Address should include street and number.

Column 18 (Intend destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town, or intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (checked) or No (no checked).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative, or steamship company, etc.

Column 21 (Whether in possession of \$20, and if less how much).—The answer should give in each case (individual or family) the exact amount of money in possession brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The answer should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1897, Philadelphia. Where in the United States more than once previously, indicate last previous entry, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

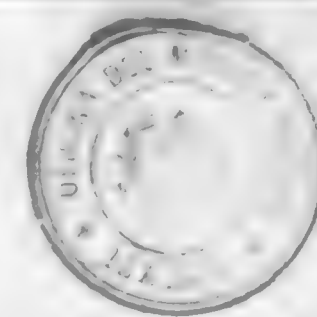
Columns 24 to 26.—These questions are self-explanatory and the answers thereto all others in the sheet are sufficient to establish the status and effects in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has not ordered him to be reshipped for a third time, the authority for such reshipment should be given.



# AFFIDAVIT OF SURGEON

I, Dr. Kimola J., Surgeon of the Port of Santos, Guatemala, do solemnly, sincerely, and truly swear that I have had eleven years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the Republic of Guatemala, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Signed before me this 12th day of May, 1925  
at Santos, Guatemala



In absence of American Consul  
at Santos, Guatemala

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration inspector at port of arrival, or, if any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest, before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Hercegovinian.    | Ruthenian (Russians).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3578

S. S. "TIVIVES"

Passengers sailing from PUERTO BARRIOS, GUATEMALA

MAY 12th,

1935.

| 1           | 2                                                                                   | 3            | 4          | 5         | 6   | 7                 | 8                     | 9       | 10      | 11                                               | 12             | 13             | 14                                        | 15                                                                                                                                                  |         |              |                                                                                                                   |                          |                                           |
|-------------|-------------------------------------------------------------------------------------|--------------|------------|-----------|-----|-------------------|-----------------------|---------|---------|--------------------------------------------------|----------------|----------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------|-------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------|
| No. on List | HEAD-TAX STATUS<br><small>This column for use of Government officials only.</small> | NAME IN FULL |            | Age       | Sex | Married or single | Calling or occupation | Able to |         | Nationality. Country of which citizen or subject | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number<br><small>Prefix number with QIV, NOIV, PV or RP and give section of act involved</small> | Issued  |              | Data concerning verifications of landings, etc.<br><small>Give dates for use of Government officials only</small> | Last permanent residence |                                           |
|             |                                                                                     | Family name  | Given name | Yrs. Mos. |     |                   |                       | Read    | Write   |                                                  |                | Country        | City or town, State, Province or District |                                                                                                                                                     | Place   | Date         |                                                                                                                   | Country                  | City or town, State, Province or District |
| 1           | 250 174                                                                             | ALEXANDER    | ETHEL      | ✓47       | F   | S                 | Teacher               | Yes     | English | Yes                                              | Canada         | African        | Canada                                    | Amherstburg, Ont.                                                                                                                                   | T.C.#15 | Belize, B.H. | May 9th, 1935.                                                                                                    | British Honduras         | Belize                                    |
| 2           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 3           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 4           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 5           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 6           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 7           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 8           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 9           |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 10          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 11          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 12          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 13          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 14          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 15          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 16          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 17          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 18          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 19          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 20          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 21          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 22          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 23          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 24          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 25          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 26          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 27          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 28          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 29          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |
| 30          |                                                                                     |              |            |           |     |                   |                       |         |         |                                                  |                |                |                                           |                                                                                                                                                     |         |              |                                                                                                                   |                          |                                           |

Total passengers . . . . 1  
U. S. citizens . . . . -  
Aliens . . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of names will be found on the back of this sheet.



# STATES IMMIGRANT INSPECTOR AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigrant inspector  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA, PA., MAY 19th,, 1935.

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(Intended future permanent residence)</small> | By whom was passage paid?<br><small>(Whether alien paid his own passage, whether paid by relative, whether paid by any other person, or by any corporation, society, society, or government)</small> | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States, and if so, when and where?<br><small>Last residence only.</small> | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States<br><small>Whether alien intends to remain in the United States permanently, or whether he intends to remain in the United States temporarily, or whether he intends to return to his native country, or whether he intends to return to his native country after a short stay in the United States.</small> | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who advocates the unlawful destruction of property, or who advocates or teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br><small>Feet Inches</small> | Color of<br><small>Hair Eyes</small> | Marks of identification |      |    |   |   |         |     |      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------------------|--------------------------------------|-------------------------|------|----|---|---|---------|-----|------|
| 1           | Mr. John H. Alexander, Amherstburg, Ontario, Cda. P.O. Box 309                                                                                             | Canada - - - -                                                            | No                                                                                                                                                                                                   | Self                                                  | Yes                                                                                                         | Yes                                                                                                              | Intransit Sept. 1933 N.Y. Intransit to Canada                                                                                                                                                                                                                                                                                                  | 1                    | No                   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | No                                       | No                                                      | No                                   | No                                   | No                      | Good | No | 5 | 4 | Dk. Br. | Br. | None |
| 2           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 3           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 4           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 5           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 6           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 7           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 8           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 9           |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 10          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 11          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 12          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 13          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 14          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 15          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 16          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 17          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 18          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 19          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 20          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 21          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 22          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 23          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 24          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 25          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 26          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 27          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 28          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 29          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |
| 30          |                                                                                                                                                            |                                                                           |                                                                                                                                                                                                      |                                                       |                                                                                                             |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         |                                      |                                      |                         |      |    |   |   |         |     |      |

Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who advocates the unlawful destruction of property, or who advocates or teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

Line United Fruit Company,  
Owners United Fruit Steamship Corporation,  
Local Agents United Fruit Company.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, **FRANK ANGUIS - MASTER**, of the **AMERICAN S.S. "TIVIVES"**, from **PTO. BARRIOS, GUATEMALA**, do solemnly, sincerely, and truly **SWEAR** that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, **ONE** in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

MASTER. **JOHN**

Sworn to before me this **19th** day of **May**, 19**35**

at **Philadelphia, Pa.**

**Immigrant Inspector.**

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1921; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head-tag status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following questions: "Read what language for, if exception is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors in this regard. For instance, "French" appearing under the head of country does not mean "French" by race or people, and, similarly, "English" appearing under the head of race or people does not mean "English" by country. An Irish, German, or Italian alien by race must properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Veneto, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NqIV," "IV," or "EIV" as appropriate, to designate whether it is quota Immigration Visa, Nonquota Immigration Visa, Prospect Visa, or Recentry Permit; and also state section of the Immigration Act of 1921 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Exemption of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$50, and if less how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—This column should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1921-1927 Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address, and if a relative, the exact relationship.

Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year, and in answering 21, if alien has been ordered deported under warrant at any time, authority in the Secretary of Labor to reapply for admission should be shown.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

"Amer."

S. S. M. S. CITY OF ELWOOD

sailing from

*Cristobal, Canal zone*  
*HONG KONG, CHINA*  
*May 14*  
*APRIL 1935*

, 19 35, Arriving at Port of *PHILADELPHIA* *MAY 22*, 19 35

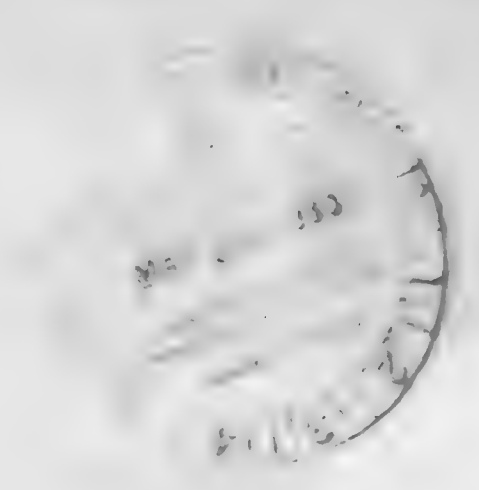
| No.<br>on<br>List | NAME IN FULL |             | AGE | Sex | Married or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                   |
|-------------------|--------------|-------------|-----|-----|----------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|                   | Family Name  | Given Name  |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 1                 | MILLS        | CLARENCE A. | 43  | M   | M                    | U.S. Passport # 474839 -<br>MIAMI, INDIANA, DEC. 9th 1891                                                                              |                                                                                                              | 50-6 OPERLIN BOULEVARD<br>CINCINNATI, OHIO |
| 2                 |              |             |     |     |                      | <i>Lee B. Doleh -</i><br>U. S. IMMIGRANT INSPECTOR                                                                                     |                                                                                                              |                                            |
| 3                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 4                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 5                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 6                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 7                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 8                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 9                 |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 10                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 11                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 12                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 13                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 14                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 15                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 16                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 17                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 18                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 19                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 20                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 21                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 22                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 23                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 24                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 25                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 26                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 27                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 28                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 29                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |
| 30                |              |             |     |     |                      |                                                                                                                                        |                                                                                                              |                                            |

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Line ROOSEVELT SS CO. IND. *AMERICAN TRAVEL*  
Owners U.S. DEPARTMENT OF COMMERCE  
Local Agents I.M.M.S.S.CO. - *Chas. Doleh*

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
 solemnly, sincerely, and truly that I have had \_\_\_\_\_  
 years' experience as a Physician  
 and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
 \_\_\_\_\_, and that I have made a personal examination of  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_  
 in number, according  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
 at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit shall be executed before an authorized officer at port of arrival and any changes that may have occurred en route in  
 the condition of any of the persons named herein shall be reported to the proper authorities at the port of departure.  
 If a surgeon sails with the vessel, the affidavit, if verified, shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and  
 the language they speak. The original stock or blood shall be the basis of the classifi-  
 cation; the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Roumanian.                                       |
| American.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                             |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Serbian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.  
This (pink) sheet is for the listing of

3579

S. S.

\* SURINAME

Passengers sailing from

SANTA MARTA, COLOMBIA

MAY 17 1935

1935

| 1           | 2                                                                     | 3                                      | 4                | 5   | 6                 | 7                     | 8                                                     | 9                                                  | 10                     | 11                                                                  | 12                                                                                                            | 13                   | 14                                                                                                    | 15                                                                            |
|-------------|-----------------------------------------------------------------------|----------------------------------------|------------------|-----|-------------------|-----------------------|-------------------------------------------------------|----------------------------------------------------|------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL<br>Family name Given name | Age<br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to—<br>Read, write, speak, or understand English | Nationality<br>Country of which citizen or subject | Race or people         | Place of birth<br>Country City or town, State, Province or District | Immigrating Visa, Passport Visa, or Entry Permit number<br>(This column for use of Government officials only) | Issued<br>Place Date | Date concerning verifications of findings, etc.<br>(This column for use of Government officials only) | Last permanent residence<br>Country City or town, State, Province or District |
| 1           | <i>lost</i>                                                           | Diaz Albert                            | 37               | M   | S                 | Seaman                | Spanish English                                       | Chile                                              | Spanish Latin American | Chile Valparaiso                                                    |                                                                                                               |                      |                                                                                                       | U.S.A. 2500 street N.Y.C.                                                     |
| 2           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 3           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 4           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 5           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 6           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 7           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 8           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 9           |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 10          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 11          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 12          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 13          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 14          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 15          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 16          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 17          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 18          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 19          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 20          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 21          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 22          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 23          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 24          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 25          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 26          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 27          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 28          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 29          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |
| 30          |                                                                       |                                        |                  |     |                   |                       |                                                       |                                                    |                        |                                                                     |                                                                                                               |                      |                                                                                                       |                                                                               |

Form 100  
NOTICE TO DELIVER, DETAIN ON BOARD, OR REMOVE ALIENS

U. S. DEPARTMENT OF LABOR  
IMMIGRATION AND NATURALIZATION SERVICE

Point of departure: *5/24/35*

To the Officer, Agent, Consular, Master, or Officer in Charge of the vessel:

Pursuant to the provisions of the Acts of February 5, 1917, December 26, 1920, and May 26, 1924, and the Immigration Regulations issued by the Secretary of Labor thereunder, you are hereby directed to deliver to the following named aliens, with their baggage, your attention being invited to the appropriate sections of the statutes appearing on the reverse side hereof, and regulations made thereunder:

NAME: *Albert Diaz*

STATUS ON VESSEL: *Seaman*

By direction of the Immigration and Naturalization Officer in Charge:

Receipt of the above notice is hereby acknowledged:

*[Signature]*

U. S. Immigration Inspector

14-000

*See file 4419/302*  
*Admitted 5/24/35 by BSI; head tax*  
*[Signature] Chairman*

*United Fruit Co.*  
*Steamship Agents*

*A.I. Brel # 283107*  
*dated 5/24/35*  
*M.D.G.*

Total passengers . . . . .  
U. S. citizens . . . . .  
Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



| 1                 | 2                                                                                         | 3                               |
|-------------------|-------------------------------------------------------------------------------------------|---------------------------------|
| No.<br>on<br>List | <b>HEAD-TAX<br/>STATUS</b><br>(This column<br>for use of<br>Government<br>officials only) |                                 |
| 1                 | <i>SL</i>                                                                                 | <i>Seventy<br/>head<br/>tax</i> |
| 2                 |                                                                                           | <i>Dinner</i>                   |
| 3                 |                                                                                           |                                 |
| 4                 |                                                                                           |                                 |
| 5                 |                                                                                           |                                 |
| 6                 |                                                                                           |                                 |
| 7                 |                                                                                           |                                 |
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| 28                |                                                                                           |                                 |
| 29                |                                                                                           |                                 |
| 30                |                                                                                           |                                 |

[illegible]

## AT PORT OF ARRIVAL

And the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

MAY 23rd

19 35

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

Passengers sailing from SANTA MARTA, COLOMBIA, MAY 17th, 1938

| 7                     | 8        |                                                              |       | 9                                                     | 10                            | 11             | 12                                        | 13                                                                                                                                      |        | 14   | 15                                                                                                    |                          |                                           |
|-----------------------|----------|--------------------------------------------------------------|-------|-------------------------------------------------------|-------------------------------|----------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------|------|-------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------|
| Calling or occupation | Able to— |                                                              |       | Nationality.<br>(Country of which citizen or subject) | Race or people                | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number<br>(Prefix number with QIV, NOIV, PV, or RP and give section of act involved) | Issued |      | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) | Last permanent residence |                                           |
|                       | Read     | Read what language (or if exception claimed, on what ground) | Write |                                                       |                               | Country        | City or town, State, Province or District |                                                                                                                                         | Place  | Date |                                                                                                       | Country                  | City or town, State, Province or District |
| ✓<br>Seaman           | Yes      | Spanish ✓<br>English ✓                                       | Yes ✓ | Chile ✓                                               | Spanish ✓<br>Latin American ✓ | Chile ✓        | Valparaiso ✓                              |                                                                                                                                         |        |      |                                                                                                       | U.S.A. ✓                 | 25801 street<br>N.Y.C. ✓                  |

See file #4419/302  
Admitted 5/24/35 by BSI; head tax  
J. E. Coughlin, Chairman

United Fruit Co.  
Steamship Agents.)

F.I. Bill # 283107  
dated 5/24/35  
m2g

United Fruit Co.  
Steamship Agents

49 Bill # 283107  
dated 5/24/50  
mcy



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This (pink) sheet is for the listing of

3579

S. S.

" SUR INAME"

## Passengers sailing from

SANTA MARTA, COLOMBIA

MAY 17th

193

Total passengers . . . . .

U. S. citizens . . . . .

Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence for one year or more.

† List of races will be found on the back of this sheet.



## 1



Since the 1990s, with much the same philosophy, the U.S. Coast Guard has been able to reduce the number of arrivals and any chance that may have occurred on route in the Caribbean, thus reducing the number of arrivals to a minimum.

If there are no arrivals to the coast, then the U.S. Coast Guard will not conduct a port of departure and no one else will need to follow suit.

14-6381



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This pink sheet is for the listing of

3579

S. S.

\* SUR NAME

### Passengers sailing from

SANTA MARTA, COLOMBIA

MAY 17th

193

|                            |       |
|----------------------------|-------|
| Total passengers . . . . . | _____ |
| U. S. citizens . . . . .   | _____ |
| Aliens . . . . .           | _____ |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



## List 1

The entries on this sheet must be typewritten or printed.

MAY 23rd

19 35

**Note** — Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of, affiliated with any association, maintaining and teaching a belief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "SURINAME"

Sailing from SANTA MARTA, COLOMBIA

MAY 17th

1935

Arriving at Port of PHILADELPHIA, Pa

May

1935

| No.<br>on<br>List | NAME IN FULL               |            | Age | Sex | Status | IF BORN IN UNITED STATES IN PLACE OF BIRTH OR<br>IF NATIVE OF INSULAR POSSESSIONS OF THE UNITED STATES, GIVE NAME AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHERE NATURALIZATION PAPERS<br>WERE OBTAINED IN FULL | ADDRESS IN UNITED STATES                                    |
|-------------------|----------------------------|------------|-----|-----|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
|                   | Family Name                | Given Name |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 1                 | McEvoy                     | Thomas     | 32  | M   | S      |                                                                                                                                                                | Naturalized thru Father in Supreme<br>Court New York April 1910                                         | Sister; Mrs. M. Reggee 177<br>Linden Ave. Jersey City, N.J. |
| 2                 | Identified at Philadelphia |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 3                 | May 17, 1935               |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 4                 | Leary, A. M. M.            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 5                 | Developed in Philadelphia  |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 6                 |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 7                 |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 8                 |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 9                 |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 10                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 11                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 12                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 13                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 14                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 15                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 16                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 17                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 18                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 19                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 20                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 21                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 22                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 23                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 24                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 25                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 26                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 27                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 28                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 29                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |
| 30                |                            |            |     |     |        |                                                                                                                                                                |                                                                                                         |                                                             |

-63-

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Pan.*  
S. S. "Darien" sailing from Pto Barrios, Guatemala May 19th. 1935, 19 , Arriving at Port of Philadelphia May 26th. , 1935

| No.<br>on<br>List | NAME IN FULL |            | AGE<br>Yrs. Mos. | SEX<br>M F | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES    |
|-------------------|--------------|------------|------------------|------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------|
|                   | FAMILY NAME  | GIVEN NAME |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 1                 | Lyons        | Nehemiah   | 43               | 1          | M                    | U.S. Passport # 99 - issued at the<br>American Vice Consulate - Tela, Honduras<br>3/8/35                                                 | Southern District Of New York<br>1927                                                                        | 70 West 127th. St. New York |
| 2                 |              |            |                  |            |                      | Lee B. Dolch -<br>U. S. IMMIGRANT INSPECTOR                                                                                              |                                                                                                              |                             |
| 3                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 4                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 5                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 6                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 7                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 8                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 9                 |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 10                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 11                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 12                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 13                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 14                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 15                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 16                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 17                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 18                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 19                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 20                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
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| 25                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 26                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 27                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 28                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 29                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |
| 30                |              |            |                  |            |                      |                                                                                                                                          |                                                                                                              |                             |

- 64 -

Line  
Owners  
Local Agents

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
 solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_ years' experience as a Physician  
 and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
 \_\_\_\_\_, and that I have made a personal examination of  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

(Signature and Title of Immigration Officer or other officer authorized to administer oaths)

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in  
 the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
 If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and  
 the language they speak. The original stock or blood shall be the basis of the cla-  
 sification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Rumanian.                                        |
| Armenian.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rassniak).                            |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |







## List -

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia, Pa. (enroute to Hamburg, Germany) May 23, 1955

Note.—Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Am.

S. S. ESPARTA

sailing from

TELA HOND

MAY 23RD.

1935

Arriving at Port of

PHILADELPHIA  
MAY 30TH.

CHARLESTON S.C.  
MAY 27TH.

1935

| No.<br>ON<br>LIST | NAME IN FULL |            | AGE  |      | SEX<br><br>MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|------|------|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mos. |                                 |                                                                                                                                          |                                                                                                              |                          |
| 1                 | BRANIFF      | SIEGL      | 35   | 7    | F                               | M OCTOBER 18TH. 1899 ORANGE MASS                                                                                                         |                                                                                                              | ORANGE MASS.             |
| 2                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 3                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 4                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 5                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 6                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 7                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 8                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 9                 |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 10                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 11                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 12                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 13                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 14                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 15                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 16                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 17                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 18                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 19                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 20                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 21                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 22                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 23                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 24                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 25                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 26                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 27                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 28                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 29                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |
| 30                |              |            |      |      |                                 |                                                                                                                                          |                                                                                                              |                          |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

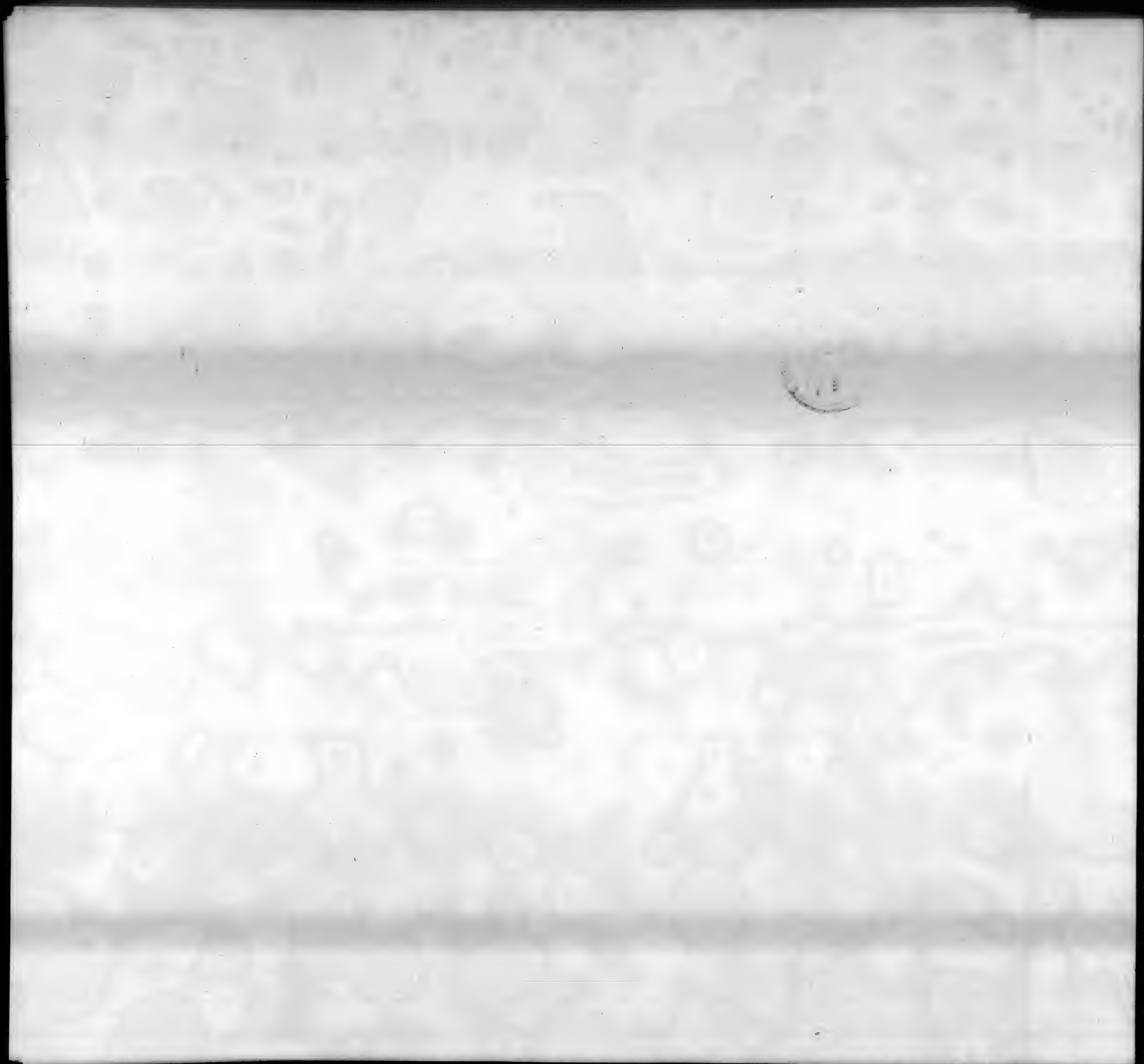
66

Not in  
Master

Line  
Owners  
Local Agents

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Form No. 100 (Rev. 1-22-35)  
To be filled out by the United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port, or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

## LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITIES

S. S. Am. M.S. Galfbird

sailing from Las Piedras, Venezuela. May 23rd 1935, 19 , Arriving at Port of Philadelphia Pa. May 30th 1935, 19

IF NATIVE OF UNITED STATES INSULAR POSSESSION OR  
OF NATIVE OF UNITED STATES, GIVE NAME AND  
PLACE OF BIRTH, CITY OR TOWN AND STATE.

IF NATURALIZED, GIVE NAME AND PLACE OF BIRTH  
WHICH ISSUED NATURALIZATION PAPERS  
AND DATE OF PAPERS

IMMIGRATION OFFICIAL'S SIGNATURE

Gundersen

Knut S.T.

28

26 6 M. S.

*Lee B. Dolch*  
U. S. IMMIGRANT INSPECTOR

Naturalization Certif. # 3424334 -  
U.S. Court of Eastern District of N.Y. 538 61st Street  
Brooklyn N.Y. May 26th 1931 Brooklyn N.Y.

*Lo* *Jim*  
*Master*

-67-

### IMPORTANT NOTICE

1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







U. S. DEPARTMENT OF LABOR  
Immigration and Naturalization Service

Charleston, S. C.,

May 31, 1935.

RECEIVED from Master, s/s *W. J. Swines*, alien crew list, Form 680,  
containing names, etc., *17* aliens and *37* U. S. citizens.

No. Certified: —

No. Detained: —

*1 U.S. citizen*

*W. J. Swines*  
Immigrant Inspector.

5-04-520  
Regular possessions of the United States arriving at a port of continental United States from a  
port, and such citizens arriving at a port of said insular possessions from a foreign port, a port

UNITED STATES CITIZENS

(THE IMMIGRATION AUTHORITIES)

*W. J. Swines*

MAY 20th, 1935, Arriving at Port of PHILADELPHIA, PA. - JUNE 2nd, 1935.

| IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------|
| — MADISON, WISCONSIN                                                                                         | 4300 LAKE SHORE DRIVE, CHICAGO, ILL. |

*end trip passenger Sailed Phila 5/20/35*  
*Admitted as U.S. Citizen*

-68-

Line UNITED FRUIT COMPANY.  
Owners UNITED FRUIT STEAMSHIP CORPORATION,  
Local Agents UNITED FRUIT COMPANY.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "TIVIVE" sailing from Quebec, Canada PHILADELPHIA, PA., MAY 20th, 1935, Arriving at Port of PHILADELPHIA, PA. - JUNE 2nd, 1935.

| No.<br>on<br>List | NAME IN FULL |            | AGE  |     | Sex | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|-------------------|--------------|------------|------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mo. |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 1                 | KEYES        | BLAIR S.   | 50   | -   | M   |                      | APRIL 7th, 1885. - MADISON, WISCONSIN                                                                                                    |                                                                                                              | 4300 LAKE SHORE DRIVE, CHICAGO, ILL. |
| 2                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 3                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 4                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 5                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 6                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 7                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 8                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 9                 |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 10                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 11                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 12                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 13                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 14                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 15                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 16                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 17                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 18                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 19                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 20                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 21                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 22                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 23                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 24                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 25                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 26                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 27                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 28                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 29                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 30                |              |            |      |     |     |                      |                                                                                                                                          |                                                                                                              |                                      |

Round trip passenger, Sailed Phila 5/20/35.  
Admitted as U.S. Citizen

U. S. DEPARTMENT OF LABOR  
Immigration and Naturalization Service

Charleston, S. C.,  
May 31, 1935.

Received from date, s/s Mr. J. J. Jones, alien crew list, Form 690,  
containing names, etc., 17 aliens and 37 U. S. citizens.

Ins. Certified: —  
No. Denied: —

1 U.S. citizen

W. J. Jones  
Immigrant Inspector.

-68-

Line UNITED FRUIT COMPANY,  
Owners UNITED FRUIT STEAMSHIP CORPORATION,  
Local Agents UNITED FRUIT COMPANY.

IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "TIVIVES"

sailing from

Puerto Rico, P.R.  
PHILADELPHIA, PA.

MAY 20th,

1935,

Arriving at Port of

PHILADELPHIA, PA.

- JUNE 2nd,

1935.

| No.<br>ON<br>LIST | NAME IN FULL |            | AGE  |      | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|-------------------|--------------|------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 1                 | KEYES        | BLAIR S.   | ✓ 50 | -    | M   | M                    | APRIL 7th, 1885. - MADISON, WISCONSIN                                                                                                    |                                                                                                              | 4300 LAKE SHORE DRIVE, CHICAGO, ILL. |
| 2                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 3                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 4                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 5                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 6                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 7                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
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| 9                 |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
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| 12                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 13                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 14                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 15                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 16                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 17                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 18                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 19                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 20                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 21                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 22                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 23                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 24                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 25                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 26                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 27                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 28                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 29                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |
| 30                |              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                      |

*Round trip passenger, sailed Nov 20/35  
Admitted to U.S. on 12/1/35*

- 68 -

Line UNITED FRUIT COMPANY,  
Owners UNITED FRUIT STEAMSHIP CORPORATION,  
Local Agents UNITED FRUIT COMPANY.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

From S. S. GRANADA

Sailing from ALVARO OBREGON, MEXICO.

MAY 29th

, 1935

, Arriving at Port of

PHILADELPHIA, PA.

JUN 2 4th

, 1935

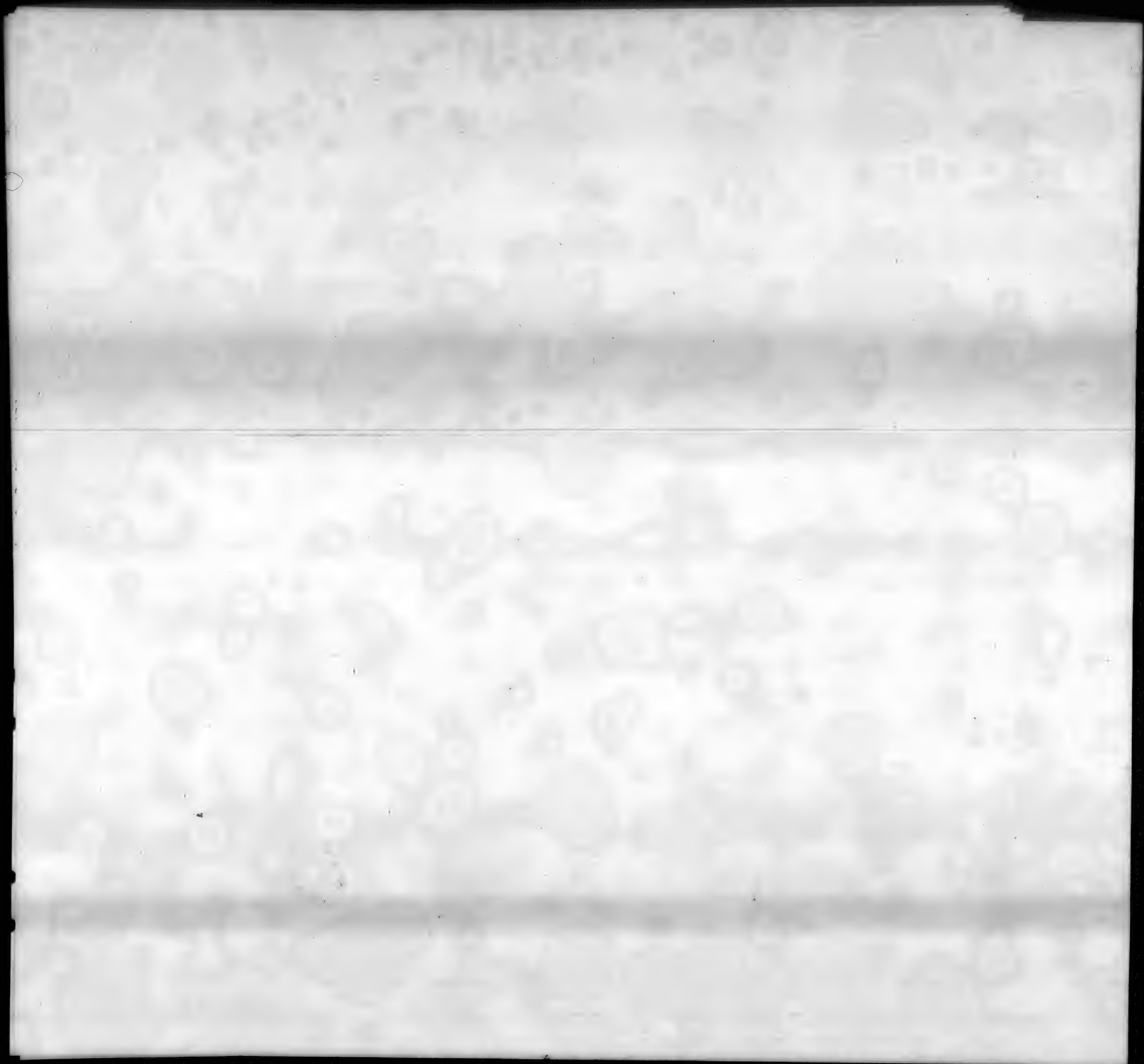
| No.<br>on<br>List | NAME IN FULL |              | AGE | SEX | MARRIED<br>or SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE. | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES             |
|-------------------|--------------|--------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------|
|                   | Family Name  | Given Name   |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 1                 | DOUGHERTY    | MILDRED      | 38  | F   | S                    | Philadelphia, Pa. Oct, 1st 1895                                                                                                         |                                                                                                              | 309 S. 4th Street, Philadelphia, Pa. |
| 2                 | Hill         | Josephine. A | 57  | F   | M                    | Bergen, Norway. 1878                                                                                                                    | District Court Brooklyn, N.Y.<br>May, 1930                                                                   | 140-15, 151st. South Ozone Pk. N.Y.  |
| 3                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 4                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 5                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 6                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 7                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 8                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 9                 |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 10                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 11                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 12                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 13                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 14                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 15                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 16                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 17                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 18                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 19                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 20                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 21                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 22                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 23                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 24                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 25                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 26                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 27                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 28                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 29                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |
| 30                |              |              |     |     |                      |                                                                                                                                         |                                                                                                              |                                      |

2 U. S. Citizens admitted  
arrived at New York  
W. J. Immigrant Inspector

17-

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Mariano Cajigas, M. D., Surgeon of the American ss. "HAPPARA" sailing therewith, do solemnly, sincerely, and truly swear that I have had four years practical experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners of Puerto Rico, and that I have made a personal examination of each of the alien passengers and that the foregoing List of Manifest shows one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Mariano Cajigas, M.D.

Subscribed before me this 6<sup>th</sup> day of June, 1930, at Philadelphia, Pa.

Lee D. Dotch

Notary Public in and for the State of Pennsylvania, My Commission Expires June 30, 1931.

## LIST OF RACES OR PEOPLES

"Races or peoples" is to be understood to mean, from which all the names and the language they speak. Those names and blood link to the race and the descriptive name, taken reference only to the race and not to any original race.

|                 |               |                                              |
|-----------------|---------------|----------------------------------------------|
| American Indian | Chinese       | Romanian                                     |
| American        | Hindoo        | Russian                                      |
| Armenian        | Hmong         | Russian, Russian                             |
| Berber          | Indo          | Scandinavian (Norwegian, Danish and Swedish) |
| Berberian       | Indo-Northern | Swedish                                      |
| Chinese         | Indo-Southern | Swiss                                        |
| Croatian        | Japanese      | Slavonic                                     |
| Czech           | Korean        | Slovak                                       |
| Danish          | Latvian       | Spanish                                      |
| Dutch           | Malay         | Spanish American                             |
| East Indian     | Malay         | Syrian                                       |
| English         | Montenegrin   | Turkish                                      |
| Finnish         | Mongolian     | Welsh                                        |
| French          | Polish        | West Indian (Cuban)                          |
| German          | Portuguese    |                                              |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3580

S. S. "BARBARA" (American)

Passengers sailing from San Juan, Puerto Rico

June 1

1935

| 1           | 2                                                                     | 3            | 4              | 5    | 6   | 7   | 8                 | 9                                   | 10       | 11                                                            | 12                                                    | 13             | 14             | 15      |                         |                    |                 |                            |         |              |
|-------------|-----------------------------------------------------------------------|--------------|----------------|------|-----|-----|-------------------|-------------------------------------|----------|---------------------------------------------------------------|-------------------------------------------------------|----------------|----------------|---------|-------------------------|--------------------|-----------------|----------------------------|---------|--------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |                | Age  |     | Sex | Married or single | Calling or occupation               | Able to— |                                                               | Nationality.<br>(Country of which citizen or subject) | Race or people | Place of birth |         | Immigration Visa Number | Issued at—         | Date            | * Last permanent residence |         |              |
|             |                                                                       | Family name  | Given name     | Yrs. | Mo. |     |                   |                                     | Read     | Read what language (or, if exemption claimed, on what ground) |                                                       |                | Write          | Country |                         |                    |                 | City or town               | Country | City or town |
| 1           |                                                                       | Gartner      | Sister Makaria | 50   | 10  | F.  | S.                | (Catholic Sister)<br>Nursing Sister | Yes      | German, English, Spanish                                      | Yes                                                   | Germany        | German         | Germany | Lorch<br>Hessen         | Form 544<br>#58545 | San Juan, P. R. | June 1, 1935               | P. R.   | Utah         |
| 2           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 3           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 4           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 5           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 6           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 7           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 8           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 9           |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 10          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 11          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 12          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 13          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 14          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 15          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 16          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 17          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 18          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 19          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 20          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 21          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 22          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 23          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 24          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 25          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 26          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 27          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 28          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 29          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |
| 30          |                                                                       |              |                |      |     |     |                   |                                     |          |                                                               |                                                       |                |                |         |                         |                    |                 |                            |         |              |

Form 544

ALIEN CERTIFICATE—INSULAR TERRITORY

(ORIGINAL)

No. 58545

U. S. DEPARTMENT OF LABOR

IMMIGRATION SERVICE

Port of San Juan, P. R., 1935

This is to certify that the alien Sister Makaria Gartner, citizen of Germany and of the German race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at San Juan, P. R., 1935 ex S. C. A. 1  
Status under Immigration Act of 1924 when admitted Permanent Resident  
Said alien is about to proceed to San Juan, P. R. via the seaport of San Juan, P. R. and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 51—; Height, 5-6; Color of hair, Black  
Color of eyes, Brown  
Identifying documents in alien's possession Intention Certificate  
Signature of alien Sister Makaria Gartner  
Surrendered at Philadelphia, Pa. to Inspector Lee B. Dolch, June 6, 1935

Form 516 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)  
U. S. DEPARTMENT OF LABOR No. 58545  
IMMIGRATION SERVICE Port of San Juan, P. R. June 1, 1935

This is to certify that the alien Sister Makaria Gartner, citizen of Germany and of the German race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at San Juan, P. R. on June 1, 1935 ex S. Barbara  
Status under Immigration Act of 1924 when admitted Permanent Resident  
Said alien is about to proceed to Philadelphia, Pa. via the seaport of Philadelphia, Pa. and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 51; Height, 5' 6"; Color of hair, Blond  
Color of eyes, Blue  
Identifying documents in alien's possession Intention Certificate  
Signature of alien Sister Makaria Gartner  
Surrendered at Philadelphia, Pa. to Inspector Lee B. Dolch June 4, 1935

Total passengers . . . 47  
U. S. citizens . . . 46  
Aliens . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



List 1

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

3580

S. S.

"BAGBABA" (American)

*Passengers sailing from* San Juan, Puerto Rico

June 1

19 35

| No. on List | HEAD-TAX STATUS | NAME IN FULL | Age            | Sex       | Married or single | Calling or occupation | Able to | Nationality              | Race or people | Place of birth | Immigration Visa Number | Issued at | Date         | Last permanent residence |                 |              |       |        |
|-------------|-----------------|--------------|----------------|-----------|-------------------|-----------------------|---------|--------------------------|----------------|----------------|-------------------------|-----------|--------------|--------------------------|-----------------|--------------|-------|--------|
|             |                 | Family name  | Given name     | Yrs. Mos. |                   |                       | Read    | Write                    |                | Country        | City or town            |           |              | Country                  | City or town    |              |       |        |
| 1           |                 | Partner      | Sister Makaria | 50        | 10                | P. S. Nursing Sister  | Yes     | German, English, Spanish | Yes            | Germany        | German                  | Germany   | Lorch Hessen | Form 546 #59545          | San Juan, P. R. | June 1, 1926 | P. R. | Utledo |

*Lee B. Dolch*  
U. S. IMMIGRANT INSPECTOR

A. T. OF DATE INSULAR TERRITORY

U. S. INSULAR TERRITORY

Port of

. 19.

This is to certify that the above named person, *Partner*, has been lawfully admitted to the United States for permanent residence and is entitled to this office as follows: *19* S. S.

and is entitled to admission at a seaport of continental United States by the receipt of this certificate.

Height: *5' 10"* Color of hair: *Black*

Inspector *Lee B. Dolch* June 1, 1926

|                           |    |
|---------------------------|----|
| Total passengers* . . . . | 47 |
| U. S. citizens . . . . .  | 46 |
| Aliens . . . . .          | 1  |

\* Permanent residence within the meaning of this paragraph shall be in accordance with the provisions of the law on residence.







## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, John Foreyth Currier  
of the American ss. "BARBARA" from San Juan, Puerto Rico, do  
solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel, acting therein, or the surgeon  
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
forfeited Lists or Manifests, <sup>One</sup> in number, and that from the report of said surgeon and from my own  
inspection, I believe that none of said aliens is of any of the classes excluded from admission into the United States by  
section three of the Immigration Act, and that, according to the best of my knowledge and belief, the information in  
said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Subscribed to before me this 6<sup>th</sup> day of June, 1935  
at Philadelphia, Pa

Lee B. Bolch  
Immigration Officer.

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

[illegible][illegible]

Although the United States has the largest number of foreign-born people in the world, the West Indies is not a heavily Americanized region. In contrast, the Caribbean is a part of the African American Diaspora, and the Caribbean people are the only people in the world who have lived under that bondage.

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

The present study was carried out in the framework of the Project "Innovative Technologies for the Development of Chemical and Environmental Engineering" (Progetto "Tecnologie Innovative per lo Sviluppo dell'Ingegneria Chimica e Ambientale") funded by the Italian Ministry of University and Research (MUR) and the Italian Ministry of the Environment (MASE).

DECEMBER 1998

concomitantly of Fig. 1, panel 11, the Mammals, Birds, Reptiles, and Amphibians, and of Fig. 2, panels 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838,

Lemma 12. *Let  $\mathcal{C}$  be a class of structures. Let  $\mathcal{C}_1$  be the class of structures  $\mathcal{A}$  such that  $\mathcal{A} \in \mathcal{C}$  and  $\mathcal{A}$  is a prime model of its theory. Then  $\mathcal{C}_1$  is a class of structures.*

Conjecture 2.4 (a) [26]  $\rightarrow$  Theorem 2.4 (a) [26] is a special case of the following theorem. The proof, given below, is a special case of the proof of Theorem 2.4 (a) [26].

anyone using a computer, they will be able to access the central system and your data. The network of business units and schools should be applied for relevant information. The authority to provide access should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARBARA" (American) sailing from San Juan, Puerto Rico, June 1, 1935, Arriving at Port of Philadelphia, Pa., June 6, 1935

| No. on List | NAME IN FULL         |                      | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                                                           |
|-------------|----------------------|----------------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
|             | FAMILY NAME          | GIVEN NAME           |     |     |                                                                                                                                    |                                                                                                        |                                                                                                    |
| 1           | Adams                | Sarah C.             | 26  | F.  | M. Sewanee, Tenn., September 26, 1908                                                                                              |                                                                                                        | The Plains, Va.                                                                                    |
| 2           | Adams                | Sarah C.             | 7   | F.  | S. The Plains, Va., February 20, 1928                                                                                              |                                                                                                        | do.                                                                                                |
| 3           | Adams                | James Thompson       | 4   | M.  | S. Warrenton, Va., April 12, 1931                                                                                                  |                                                                                                        | do.                                                                                                |
| 4           | Borrell              | Jennie A.            | 70  | F.  | W. Lancaster, Pa., November 9, 1864                                                                                                |                                                                                                        | 523 N. 7th St., Lebanon, Pa.<br><i>Manchester, Mich.</i><br><i>2659 Quincy Ave., London, Wash.</i> |
| 5           | Bradley              | Paul B.              | 35  | M.  | M. Coal City, Ill., November 23, 1899                                                                                              |                                                                                                        |                                                                                                    |
| 6           | Bradley              | Edith Ware           | 39  | F.  | M. Salida, Colo., May 12, 1895                                                                                                     |                                                                                                        | do.                                                                                                |
| 7           | Cartagena            | Josefa G. de         | 50  | F.  | M. Caguas, P. R., December 30, 1884                                                                                                |                                                                                                        | Cavalier Hotel, Washington, D.C.                                                                   |
| 8           | Coriero              | Matilde              | 24  | F.  | S. San Juan, P. R., January 18, 1911                                                                                               |                                                                                                        | 5008 Broadway, New York, N.Y.                                                                      |
| 9           | Cordova              | Henry                | 23  | M.  | M. San Juan, P. R., October 3, 1911                                                                                                |                                                                                                        | 4001 14th St., N.W., Washington, D.C.                                                              |
| 10          | Cordova              | Alleen               | 23  | F.  | M. Louisville, Ky., March 25, 1912                                                                                                 |                                                                                                        | do.                                                                                                |
| 11          | Cordova              | Catherine Mercedes   | 2   | F.  | S. San Juan, P. R., January 27, 1933                                                                                               |                                                                                                        | do.                                                                                                |
| 12          | Navila Alonso        | Hector Manuel        | 18  | M.  | S. San Juan, P. R., January 2, 1917                                                                                                |                                                                                                        | U.S. Naval Academy, Annapolis, Md.                                                                 |
| 13          | Dominquez, Povira de | Ana                  | 49  | F.  | M. Guayama, P. R., April 1, 1886                                                                                                   |                                                                                                        | 523 W. 142nd St., New York, N.Y.                                                                   |
| 14          | Duffy                | Father William F. P. | 33  | M.  | S. Philadelphia, Pa., September 27, 1902                                                                                           |                                                                                                        | 3318 Ryan Ave., Philadelphia, Pa.                                                                  |
| 15          | Ginorio              | Carmen               | 32  | F.  | S. San Juan, P. R., June 4, 1903                                                                                                   |                                                                                                        | International House, New York, N.Y.                                                                |
| 16          | Gomez                | Francisco            | 40  | M.  | M. San Sebastian, P. R., February 4, 1895                                                                                          |                                                                                                        | 521 W. 111th St., New York, N.Y.                                                                   |
| 17          | Gomez, Berrios de    | Josefina             | 36  | F.  | M. San Juan, P. R., September 15, 1899                                                                                             |                                                                                                        | do.                                                                                                |
| 18          | Gonzales             | Carmen               | 30  | F.  | S. Gurabo, P. R., June 9, 1904                                                                                                     |                                                                                                        | 25 Hillside Ave., New York, N.Y.                                                                   |
| 19          | Gumprich             | Florence             | 50  | F.  | M. New York, N. Y., November 15, 1885                                                                                              |                                                                                                        | 157<br>215 W. 74th St., New York, N.Y.                                                             |
| 20          | Hernandez Borch      | Carmen               | 48  | F.  | M. Santurce, P. R., July 15, 1886                                                                                                  |                                                                                                        | 71 Martin St., Cambridge, Mass.                                                                    |
| 21          | Hernandez Borch      | Cecilia              | 20  | F.  | S. Santurce, P. R., November 22, 1914                                                                                              |                                                                                                        | do.                                                                                                |
| 22          | Huber                | Sister De Thantal    | 26  | F.  | S. West Newton, Pa., November 7, 1908                                                                                              |                                                                                                        | Sisters Living Providence, Allison Park, Pa.                                                       |
| 23          | Leininger            | Sister M. Bertranda  | 35  | F.  | S. Pittsburgh, Pa., May 14, 1900                                                                                                   |                                                                                                        | do.                                                                                                |
| 24          | Lowry                | Glenn I.             | 41  | M.  | M. Centerville, Tenn., October 14, 1893                                                                                            |                                                                                                        | 223 Church St., Dickson, Tenn.                                                                     |
| 25          | Martens              | Rheline              | 18  | F.  | S. Utuado, P. R., January 14, 1917                                                                                                 |                                                                                                        | Sisters Living Providence, Allison Park, Pa.                                                       |
| 26          | Marschall            | Alfred N.            | 47  | M.  | M. New York, N. Y., October 16, 1888                                                                                               |                                                                                                        | 2116 Felham Ave., Baltimore, Md.                                                                   |
| 27          | Parsi                | Juan J.              | 30  | M.  | M. Mayaguez, P. R., December 4, 1904                                                                                               |                                                                                                        | 405 E. 42nd St., New York, N.Y.                                                                    |
| 28          | Quintero             | Charles E.           | 41  | M.  | M. Manati, P. R., October 5, 1892                                                                                                  |                                                                                                        | 949 West End Ave., New York, N.Y.                                                                  |
| 29          | Quintero             | Carlos L.            | 8   | M.  | S. New York, N. Y., July 5, 1929                                                                                                   |                                                                                                        | do.                                                                                                |
| 30          | Rodriguez Sanchez    | Julio                | 41  | M.  | M. Manati, P. R., May 8, 1895                                                                                                      |                                                                                                        | 221 E. 76th St., New York, N.Y.                                                                    |

Lee B. Doherty  
U. S. IMMIGRANT INSPECTOR

-71-

Master, S.S. "BARBARA"

Line Baltimore Insular

Owners A. H. Pull S/S Co., Inc.

Local Agents A. H. Pull & Co., Inc.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARRABA" (American)

sailing from

San Juan, Puerto Rico

June 1

, 19 35

, Arriving at Port of

Philadelphia, Pa., June 6

, 19 35

| No.<br>on<br>List | NAME IN FULL         |                      | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                     |
|-------------------|----------------------|----------------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------|
|                   | Family Name          | Given Name           |     |     |                      |                                                                                                                                          |                                                                                                              |                                              |
| 1                 | Adams                | Sarah C.             | 26  | F.  | M.                   | Sewanee, Tenn., September 26, 1908                                                                                                       |                                                                                                              | The Plains, Va.                              |
| 2                 | Adams                | Sarah C.             | 7   | F.  | S.                   | The Plains, Va., February 20, 1928                                                                                                       |                                                                                                              | do.                                          |
| 3                 | Adams                | James Thompson       | 4   | M.  | S.                   | Warrenton, Va., April 13, 1931                                                                                                           |                                                                                                              | do.                                          |
| 4                 | Borrell              | Jennie K.            | 70  | F.  | W.                   | Lancaster, Pa., November 9, 1864                                                                                                         |                                                                                                              | 523 N. 7th St., Lebanon, Pa.                 |
| 5                 | Bradley              | Paul R.              | 35  | M.  | M.                   | Coal City, Ill., November 23, 1899                                                                                                       |                                                                                                              | Manchester, Mich.                            |
| 6                 | Bradley              | Edith Ware           | 40  | F.  | M.                   | Salida, Colo., May 12, 1895                                                                                                              |                                                                                                              | 2659 Quincy Ave., Oden, Utah                 |
| 7                 | Cartagena            | Josefa T. de         | 50  | F.  | M.                   | Caguas, P. R., December 30, 1884                                                                                                         |                                                                                                              | do.                                          |
| 8                 | Cortero              | Matilde              | 24  | F.  | S.                   | San Juan, P. R., January 18, 1911                                                                                                        |                                                                                                              | Cavalier Hotel, Washington, D.C.             |
| 9                 | Cordova              | Henry                | 23  | M.  | M.                   | San Juan, P. R., October 7, 1911                                                                                                         |                                                                                                              | 5908 Broadway, New York, N.Y.                |
| 10                | Cordova              | Aileen               | 23  | F.  | M.                   | Louisville, Ky., March 25, 1912                                                                                                          |                                                                                                              | 4001 14th St., N.W., Washington, D.C.        |
| 11                | Cordova              | Catherine Mercedes   | 2   | F.  | S.                   | San Juan, P. R., January 27, 1933                                                                                                        |                                                                                                              | do.                                          |
| 12                | Davila Alonso        | Hector Manuel        | 18  | M.  | S.                   | San Juan, P. R., January 2, 1917                                                                                                         |                                                                                                              | U.S. Naval Academy, Annapolis, Md.           |
| 13                | Dominquez, Povira de | Ana                  | 49  | F.  | M.                   | Mayama, P. R., April 1, 1886                                                                                                             |                                                                                                              | 523 W. 143rd St., New York, N.Y.             |
| 14                | Duffy                | Father William F. F. | 33  | M.  | S.                   | Philadelphia, Pa., September 27, 1902                                                                                                    |                                                                                                              | 3318 Ryan Ave., Philadelphia, Pa.            |
| 15                | Ginorio              | Carmen               | 32  | F.  | S.                   | San Juan, P. R., June 4, 1903                                                                                                            |                                                                                                              | International House, New York, N.Y.          |
| 16                | Gomez                | Francisco            | 40  | M.  | M.                   | San Sebastian, P. R., February 4, 1895                                                                                                   |                                                                                                              | 521 W. 111th St., New York, N.Y.             |
| 17                | Gomez, Berrios de    | Josefina             | 36  | F.  | M.                   | San Juan, P. R., September 15, 1899                                                                                                      |                                                                                                              | do.                                          |
| 18                | Gonzales             | Carmen               | 30  | F.  | S.                   | Gurabo, P. R., June 9, 1904                                                                                                              |                                                                                                              | 25 Hillside Ave., New York, N.Y.             |
| 19                | Gumprich             | Florence             | 49  | F.  | M.                   | New York, N. Y., November 15, 1885                                                                                                       |                                                                                                              | 157<br>215 W. 74th St., New York, N.Y.       |
| 20                | Hernandez Porch      | Carmen               | 48  | F.  | M.                   | Sancti Spiritus, P. R., July 15, 1886                                                                                                    |                                                                                                              | 71 Martin St., Cambridge, Mass.              |
| 21                | Hernandez Porch      | Cecilia              | 20  | F.  | S.                   | Sancti Spiritus, P. R., November 22, 1914                                                                                                |                                                                                                              | do.                                          |
| 22                | Huber                | Sister De Chantal    | 26  | F.  | S.                   | West Newton, Pa., November 7, 1908                                                                                                       |                                                                                                              | Sisters Divine Providence, Allison Park, Pa. |
| 23                | Leininger            | Sister M. Bertranda  | 35  | F.  | S.                   | Pittsburgh, Pa., May 14, 1900                                                                                                            |                                                                                                              | do.                                          |
| 24                | Lowry                | Glenn J.             | 42  | M.  | M.                   | Centerville, Tenn., October 14, 1893                                                                                                     |                                                                                                              | 227 Church St., Dickson, Tenn.               |
| 25                | Marrero              | Emelina              | 18  | F.  | S.                   | Utuedo, P. R., January 14, 1917                                                                                                          |                                                                                                              | Sisters Divine Providence, Allison Park, Pa. |
| 26                | Marschall            | Alfred N.            | 47  | M.  | M.                   | New York, N. Y., October 16, 1888                                                                                                        |                                                                                                              | 2116 Pelham Ave., Baltimore, Md.             |
| 27                | Parsi                | Juan J.              | 30  | M.  | M.                   | Mayaguez, P. R., December 4, 1904                                                                                                        |                                                                                                              | 405 E. 42nd St., New York, N.Y.              |
| 28                | Quintero             | Christie E.          | 41  | F.  | M.                   | Manati, P. R., October 5, 1893                                                                                                           |                                                                                                              | 949 West End Ave., New York, N.Y.            |
| 29                | Quintero             | Carlos L.            | 8   | M.  | S.                   | New York, N. Y., July 5, 1929                                                                                                            |                                                                                                              | do.                                          |
| 30                | Rodriguez Sanchez    | Julio                | 40  | M.  | M.                   | Manati, P. R., May 8, 1895                                                                                                               |                                                                                                              | 221 E. 76th St., New York, N.Y.              |

Lee B. Dole  
U. S. IMMIGRANT INSPECTOR

-71-

Master, S.S. "BARRABA"

Line Baltimore Insular

Owners A. H. Bull & Co., Inc.

Local Agents A. H. Bull & Co., Inc.

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. "BARBARA" (American)

sailing from San Juan, Puerto Rico

June 1

, 19 35, Arriving at Port of Philadelphia, Pa., June 6

, 19 35

| No.<br>on<br>List | NAME IN FULL     |            | AGE | SEX   | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                      |
|-------------------|------------------|------------|-----|-------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------|
|                   | FAMILY NAME      | GIVEN NAME |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 1                 | Rose             | Maxine W.  | 29  | F. M. | Galesburg, Ill., August 15, 1905                                                                                                   |                                                                                                        | C/O U.S. Chamber Commerce, Washington, D.C.   |
| 2                 | Santiago         | Tomassa    | 44  | F. M. | Guayama, P. R., September 18, 1891                                                                                                 |                                                                                                        | Oxford, Ohio                                  |
| 3                 | Schon            | Maria A.   | 57  | F. W. | Hajfeld, Hungary, October 22, 1877                                                                                                 | U.S. District Court, Baltimore, Md., Jan. 9, 1911                                                      | 308 S. Catherine St., Baltimore, Md.          |
| 4                 | Sosa, Berrios de | Carmen     | 44  | F. M. | Bayamon, P. R., December 10, 1890                                                                                                  |                                                                                                        | 521 W. 11th St., New York, N.Y.               |
| 5                 | Sosa Berrios     | Fernando   | 9   | M. S. | San Juan, P. R., September 4, 1925                                                                                                 |                                                                                                        | do.                                           |
| 6                 | Stubbe           | Delia      | 22  | F. S. | San Juan, P. R., April 18, 1913                                                                                                    |                                                                                                        | 125 W. 98th St., New York, N.Y.               |
| 7                 | Usara            | Vicente    | 26  | M. S. | Ponce, P. R., December 10, 1908                                                                                                    |                                                                                                        | 69 Tieman Pl., New York, N.Y.                 |
| 8                 | Vassallo         | Estela B.  | 46  | F. W. | Corozal, P. R., March 15, 1889                                                                                                     |                                                                                                        | 542 W. 112th St., New York, N.Y.              |
| 9                 | Vassallo         | Luz Maria  | 16  | F. S. | San Juan, P. R., August 7, 1918                                                                                                    |                                                                                                        | do.                                           |
| 10                | Vassallo         | Paquita    | 9   | F. S. | San Juan, P. R., May 10, 1926                                                                                                      |                                                                                                        | do.                                           |
| 11                | Vega             | Trina      | 30  | F. W. | Dorado, P. R., December 9, 1879                                                                                                    |                                                                                                        | 80 La Salle St., New York, N.Y.               |
| 12                | Vega             | Teodoro    | 16  | M. S. | San Juan, P. R., July 4, 1918                                                                                                      |                                                                                                        | do.                                           |
| 13                | Vila             | Isabel     | 27  | F. S. | Pio Piedras, P. R., October 15, 1907                                                                                               |                                                                                                        | 3420 New Kirk Ave., Brooklyn, N.Y.            |
| 14                | Wall             | Anne       | 45  | F. M. | Minneapolis, Minn., January 17, 1890                                                                                               |                                                                                                        | C/O Miss J. Ware, Green Hill, Wakefield, R.I. |
| 15                | Wall             | Mary Anne  | 11  | F. S. | San Juan, P. R., May 3, 1923                                                                                                       |                                                                                                        | do.                                           |
| 16                | Zapater          | Antonio    | 11  | M. S. | Ponce, P. R., April 17, 1924                                                                                                       |                                                                                                        | 1834 16th St., N.W., Washington, D.C.         |
| 17                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 18                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 19                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 20                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 21                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 22                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 23                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 24                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 25                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 26                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 27                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 28                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 29                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |
| 30                |                  |            |     |       |                                                                                                                                    |                                                                                                        |                                               |

*L. B. Dolch*  
U. S. IMMIGRANT INSPECTOR

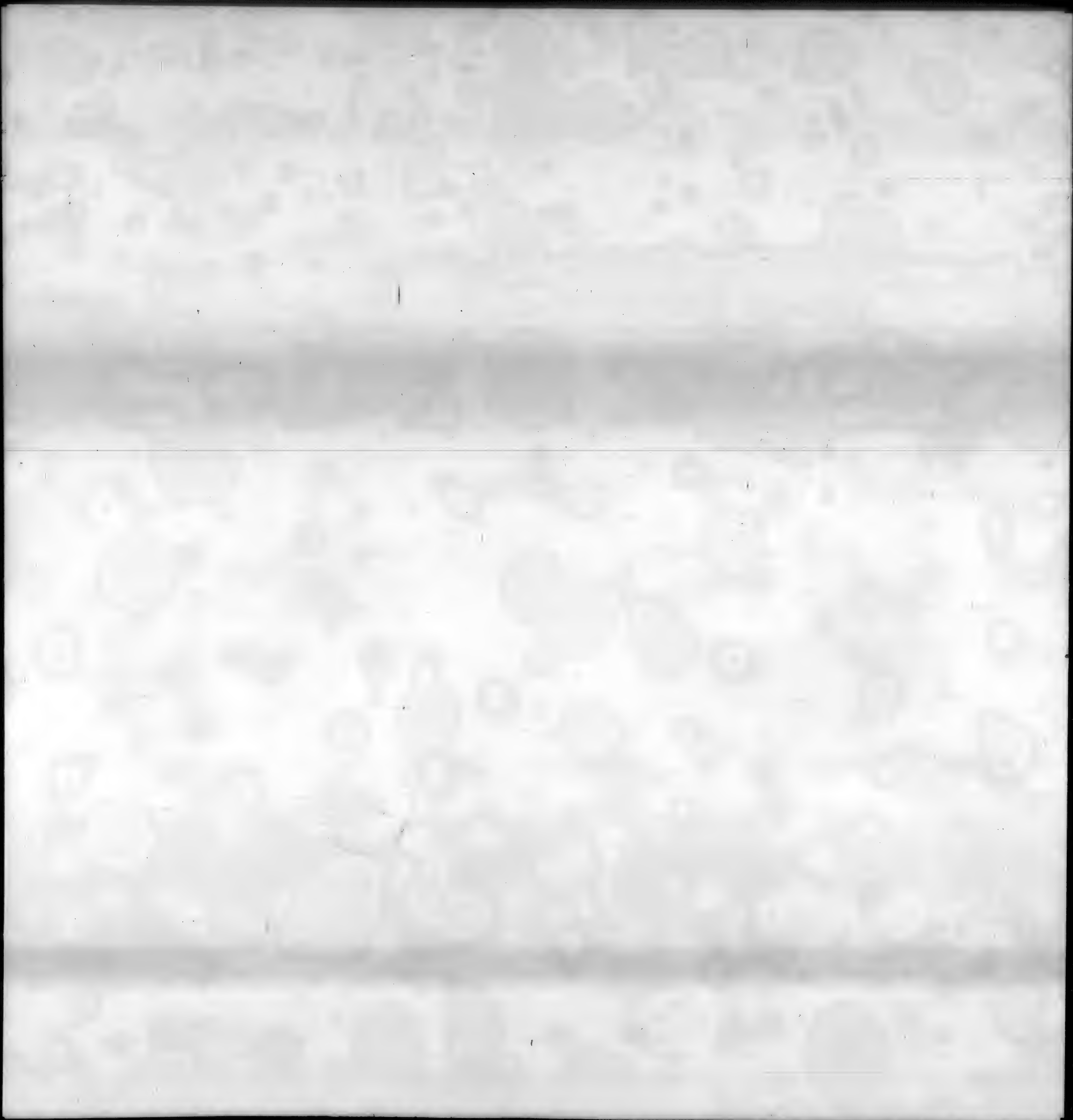
*Master, ss. "BARBARA"*

-72-

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
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4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Amer.

S. S. Gulfwing

sailing from

Las Piedras, Venezuela

May. 31 1935, 19

Arriving at Port of

Philadelphia June 7, 1935

| No. | NAME IN FULL      | AGE | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|-----|-------------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------|
| 1   | Parquharson James | 54  | M   | S                                                                                                                                  | Naturalization Cert. #1801057-<br>Supreme Court New York April 27, 1923                                | 456 Watchogue Road Staten Island NY. |
| 2   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 3   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 4   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 5   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 6   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 7   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 8   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 9   |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 10  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 11  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 12  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 13  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 14  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 15  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 16  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 17  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 18  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 19  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 20  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 21  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 22  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 23  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 24  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 25  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 26  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 27  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 28  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 29  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |
| 30  |                   |     |     |                                                                                                                                    |                                                                                                        |                                      |

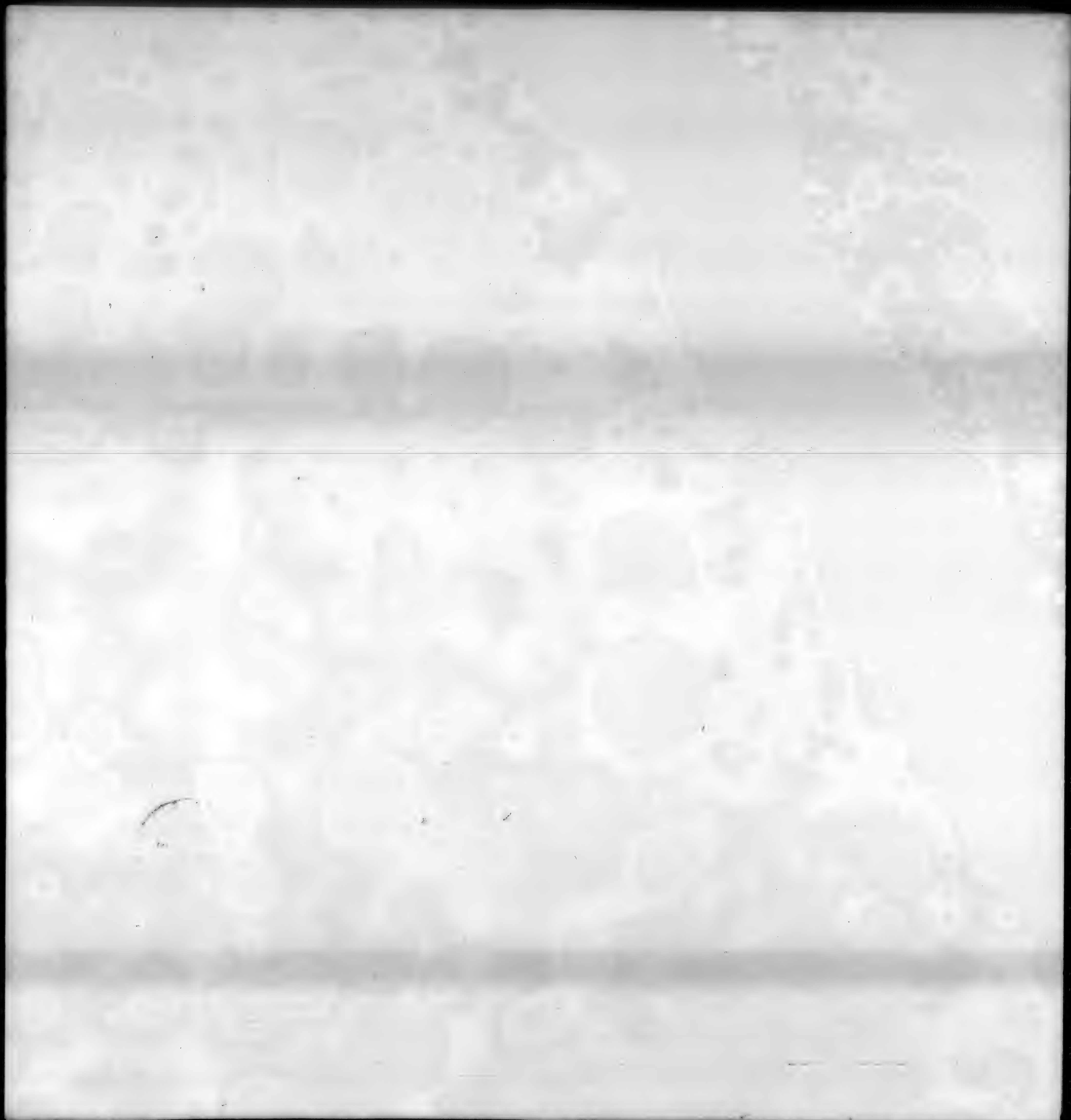
Lee B. Dolch  
U. S. IMMIGRATION INSPECTOR

C. B. A. Jones  
Master

- 73 -

IMPORTANT NOTICE. 1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers. 2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship. 3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival. 4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

U.S.S. *Guypenn* sailing from *San Pedro, W. I.*, *4/13/35*, Arriving at Port of *San Pedro*, *6/8/35*, 19

| No. | NAME IN FULL | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-----|--------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|
|-----|--------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|

|   |                         |                |  |                                                 |                       |                                                                                  |
|---|-------------------------|----------------|--|-------------------------------------------------|-----------------------|----------------------------------------------------------------------------------|
| 1 | <i>CHEHAULT Roy Lee</i> | <i>32 4 MM</i> |  | <i>7-4-3 1903</i><br><i>San Pedro, Kentucky</i> | <i>W. I. 10/16/32</i> | <i>Wife Annable</i><br><i>1893 1/2 Eastwood Road</i><br><i>Washington, D. C.</i> |
|---|-------------------------|----------------|--|-------------------------------------------------|-----------------------|----------------------------------------------------------------------------------|

*1 No. Citizens admitted*  
*Louise P. Nolan*  
U. S. IMMIGRANT INSPECTOR

*Let's have*  
*money.*

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## IMPORTANT NOTICE

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Number 1

LIST OF UNITED STATES CITIZENS  
(FOR THE IMMIGRATION AUTHORITIES)

S. S.

Sailing from *Alvaro Obregon* June 4-1935

, 19 , Arriving at Port of *Philadelphia* *June 9*, 1935

| No.<br>ON<br>LIST | NAME IN FULL                                 |            | AGE  |      | SEX | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                        |
|-------------------|----------------------------------------------|------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
|                   | FAMILY NAME                                  | GIVEN NAME | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 1                 | Calley                                       | Dorothy    | 34   |      | F   | S                    | May 5-1901 Baltimore                                                                                                                     |                                                                                                              | 4543 Pamlico R.D., <i>Balto. Md.</i>            |
| 2                 | Taylor                                       | Mary       | 34   |      | F   | S                    | July 12-1900 N.York                                                                                                                      |                                                                                                              | 1094 Woodycrest Ave. N.Y.C                      |
| 3                 | Kenwerthy                                    | Etta       | 58   |      | F   | S                    | June 4-1876 N.York                                                                                                                       |                                                                                                              | 1 Elm Place Dumont .N.J                         |
| 4                 | <i>Ryerson</i>                               | Harold     | 50   |      | M   | M                    | Feb 13-1885 Passaic. N.J                                                                                                                 |                                                                                                              | <i>N.York</i><br>190 Park Ave Williston Park. N |
| 5                 | Gans                                         | Phillip    | 34   |      | M   | M                    | Feb. 19-1901 N.York                                                                                                                      |                                                                                                              | 2799 Alameda Baltimore, <i>Md.</i>              |
| 6                 | <i>All round trip passengers</i>             |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 7                 | <i>Admitted at Philadelphia June 9, 1935</i> |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 8                 | <i>George &amp; Marie</i>                    |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 9                 | <i>Immigrant Inspector</i>                   |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 10                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 11                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 12                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 13                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 14                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 15                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 16                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 17                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 18                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 19                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 20                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 21                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 22                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 23                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 24                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 25                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 26                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 27                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 28                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 29                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |
| 30                |                                              |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                                 |

*Restaurante*

-75-

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
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4. List on this form only United States citizens or citizens of an insular possession of the United States.







REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. \_\_\_\_\_  
Port of Philadelphia ON June 9-1935

arriving at the

| NAME<br>(In full) | SEX | AGE | NATIVITY | CLASS<br>(First, sec-<br>ond, third, or<br>stowaway) | PASSENGER<br>Manifest<br>Sheet No. | DIAGNOSIS | PRESENT<br>PHYSICAL<br>CONDITION | REMARKS | This column reserved for U. S. Medical Examiners' (Instructions) | In this column Immigrant Inspectors will note U. S. Citizens |
|-------------------|-----|-----|----------|------------------------------------------------------|------------------------------------|-----------|----------------------------------|---------|------------------------------------------------------------------|--------------------------------------------------------------|
| Nil               |     |     |          |                                                      |                                    |           |                                  |         |                                                                  |                                                              |

To the U. S. Commissioner of Immigration:

I hereby declare that to the best of my knowledge and belief the foregoing is a true and complete statement of the diseases, injuries, births, and deaths among the passengers during the voyage.

Sworn to before me,

*H. J. Wainwright*  
U. S. Immigration Inspector

*W. J. Harrison*  
Ship's Surgeon

Extract from section 16 of the immigration act of February 5, 1917: "Inspectors shall have power to administer oaths \* \* \* and any person to whom such an oath has been administered in for the provisions of this act who shall knowingly or willfully make any false statement in any way affecting or in relation to the right of an alien to admission \* \* \* to the United States, shall be deemed guilty of perjury and be punished as provided by section 20 of the act approved March 4, 1909."



Diseases, Injuries, Births, and Deaths  
during the voyage.

## REPORT

Arrived June 9- 1935  
Ship's Surgeon

S. S.

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Form 512

## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1922.

## INSTRUCTIONS.

To masters and medical officers of ships, and others concerned.

Under the authority of section 14 of the act of Congress of February 5, 1917, it is hereby directed that on the arrival of a ship bringing passengers from a foreign port to any port of the United States the ship's surgeon shall deliver in person, to the United States Commissioner of Immigration, or his authorized representative, a complete report of the disease, including manifestations of epilepsy, hysteria, or insanity, injuries, births, and deaths which have occurred among the passengers during the voyage.

Said report shall state in each instance the name of the passenger concerned; whether a first class, second class, or steerage passenger; stowaway, the number used to designate the position of the passenger manifest in which the said passenger's name is to be found, and the number indicating the position of his name on said sheet; the nature of the disease or injury from which he has been suffering and his present condition at the time of arrival (e. g., "improved," "recovered," "permanently," "dead," "removed at quarantine," "removed at quarantine with family," "in ship's hospital," or other remarks which may be of assistance to the United States Immigration officers in protecting the welfare of the sick or in accounting for missing passengers).

Diseases and all other statements appearing in said report must be written legibly, but need not be in English if the ship's surgeon be more familiar with another language. The ship's surgeon shall furthermore declare on oath that to the best of his knowledge and belief his report, as herein prescribed, comprises a true and complete statement of all the diseases, injuries, births, and deaths which have occurred during the voyage.

The Commissioners of Immigration at the various ports of the United States have full authority to prevent the disembarkation of the passengers from a ship until the ship's surgeon, or, in lieu thereof, the master of the ship, shall have furnished a medical report, as above indicated.

W. W. HUSBAND,  
Commissioner General of Immigration.

APPROVED:  
JAMES J. DAVIS,  
Secretary of Labor.

## TRADUZIONE D'ISTRUZIONI.

Ai capitani e medici di navi ed a chiunque spetti.

A norma del paragrafo 14 dell'Atto del Congresso degli Stati Uniti, il 5 di Febbraio 1917, viene con questo modo, decretato che, all'arrivo in un porto degli Stati Uniti d'una nave, che trasporta passeggeri da un porto estero, il medico di bordo dovrà consegnare personalmente, nelle mani del Commissario d'Immigrazione o d'ufficiale autorizzato, un completo rapporto di tutte le malattie comprese gli indizi d'epilessia, d'isterismo o d'insania, le ferite, le nascite, e le morti, che siano avvenute durante il viaggio fra i passeggeri.

Detto rapporto dovrà indicare in ogni caso il nome del passeggero in questione, la sua condizione a bordo, se passeggero di prima, seconda, terza classe o clandestino; portare la lettera o il numero del foglio del manifest, sul quale è iscritto il nome del detto passeggero, altresì il numero d'ordine, che serve a indicare la posizione del suo nome sul foglio manifest; spiegare la natura di tutte le malattie che esso soffre o abbia sofferto e la sua condizione fisica al momento d'arrivo, per es., "mi ha guarito," "guarito," "permanente," "morto," "rimesso a quarantena," "rimesso a quarantena con famiglia," "in ospedale," o altre annotazioni, che possa essere d'aiuto agli ufficiali d'Immigrazione, sia per proteggere gli interessi dei cittadini sia per impedire l'ingresso di passeggeri malati.

La diagnosi ed ogni altra dichiarazione dovranno essere scritte in modo leggibile, però non necessariamente in Inglese, se il medico di bordo conosce meglio un'altra lingua.

Il medico di bordo dovrà altresì dichiarare sotto giuramento, per quanto a lui consta in buona fede, che il suo rapporto comprende una esatta piena descrizione di tutte le malattie, le ferite, le nascite e le morti, che siano avvenute durante il viaggio.

I Commissari d'Immigrazione nei diversi porti degli Stati Uniti hanno piena potestà per impedire lo sbarco di passeggeri malati, finché che il medico, o mancando il medico, il capitano della nave stessa avrà fornito loro il rapporto come sopra istruito.

## UEBERSETZUNG DER INSTRUCTIONEN.

An die Schiffskapitane, Schiffsurzte, und andere, die es betrifft.

Nach Grund des Abschnitts 14 der Congressbestimmungen, am 5 Februar, 1917, wird hiermit anordnet, dass der Arzt eines jeden von einem ausländischen Hafen kommenden und in einen Hafen der Vereinigten Staaten ankommenden Passagierschiffes persönlich dem Einwanderungs-Kommissar oder seinem Bevollmächtigten die vollständige Krankheits- und Todesberichte über Krankheiten (Epilepsie, Hysterie oder Insanität), Verletzungen, Geburten, und Todesfälle, die während der Reise unter den Passagieren zu verzeichnen waren, zu überreichen hat.

Dieser Bericht muss in jedem einzelnen Falle den Namen des betreffenden Passagiers enthalten, ferner, ob er in erster oder in zweiter Klasse sich befand, ob er als Zwischenfahrer Passagier oder als blinder Passagier (stowaway) die Reise machte, ferner die Krankheits- oder die Nummer mit denen man gewöhnlich die Seite des Passagiermanifestes, in welchem der Name des betreffenden Passagiers eingeschrieben ist, bezeichnet, und ebenso die Zahl, welche die Stelle des Namens auf der erwähnten Seite bezeichnet. Auch soll die Natur der Krankheit oder der Unpässlichkeit, an welcher der Passagier leidet oder litt und sein tatsächliches Befinden zur Zeit der Ankunft dargelegt sein (z. B., ob "gehessert," "hergestellt," oder "vollständig gesund").

In der Rubrik "Remarks," soll der Schiffsurzt solche Notizen verzeichnen, wie, z. B., "recovered," "in hospital," "removed at quarantine," "removed at quarantine with family," "in ship's hospital," oder andere Anmerkungen, welche der Einwanderungsbehörde der Vereinigten Staaten für die Verpflegung der Kranken oder für die Aufklärung über die Befehle Passagiere von Nutzen sein könnten.



# AFFIDAVIT OF SURGEON

I, Salvador Albino Ruiz, Surgeon of the United Fruit Company, do solemnly, sincerely, and truly swear that I have had fifteen years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the University of Maryland School of Medicine, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, Five in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Witness my hand

Sworn to before me this 1st day of April, 1918

at

My on H. C. hand

Fee: Nil

S. No. 365

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration inspector at port of arrival, and any changes must be made occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed. If no surgeon sails with the vessel, the affidavit of verification shall be executed at the point of departure before some other authorized immigration official.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzogovinian.    | Ruthenian (Rusyn).                            |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this pink sheet.

3581

S. S. 17 23 24 25 26 27 28 29 30

### Passengers sailing from

June 2011

19

|                            |   |
|----------------------------|---|
| Total passengers . . . . . | 2 |
| U. S. citizens . . . . .   | 1 |
| Aliens . . . . .           | 1 |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



The entries on this sheet must be typewritten or printed.

## Arriving at Port of

PHILADELPHIA. PA.

JUNE 9th

19 35

*Note.* Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disseminates or has passed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member or affiliated with any organization entertaining and teaching such ideas in or opposition to organized government, or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government, because of his or their official character."

| Line | Owners | Local Agents |
|------|--------|--------------|
| 1    | ...    | ...          |
| 2    | ...    | ...          |
| 3    | ...    | ...          |
| 4    | ...    | ...          |
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| 19   | ...    | ...          |
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# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, W. J. Long, Master, of the U. S. S. Tumbler, from San Juan, P. R., do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 10 day of June, 1920  
at San Juan, P. R.  
W. J. Long  
Immigrant Inspector.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head for status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example, Civil engineer, Stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following questions: "Read what language?" (if exemption is claimed, specify what ground). In answering this question, the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be confined to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Column 11 (Country of birth).—The entry should be made to the distinction between race and the country of birth, and must be carefully revised by inspectors in this regard. For instance, "France," appearing under the head of country does not mean "French" by race or people, and, similarly, "French," appearing under the head of race or people does not mean "France" by country. An Irish, German, or Italian alien by race might properly come under the heading of French, Swiss, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (CHABOK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Veneto, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (North)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (South)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP," as appropriate, to designate whether it is quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a), (b), or (c).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Intentions of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Alien or an intended residence of one year shall constitute permanent residence. The first country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (Bond, destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place and date of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—This question should be either Yes (filled) or No (left blank).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative, friend, steamship company, etc.

Column 21 (Whether in possession of \$20, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money shown Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States and, if so, when, where, and date of last departure).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as 1894, 1897, Philadelphia. Where in the United States more than once previously, indicate just and date only, and give date of arrival, date of last departure, and the last country.

Column 23 (Whether going to see relative or friend).—The answer should show whether going to see either a relative or friend, with name and complete address, if a relative, the exact relationship.

Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on this sheet, are subject to review by inspectors during a few examinations of aliens. However, in answering question 25, if given the name and date of departure within one year, and in answering 26, if ship has been ordered deported and departed at any time, authority in the Secretary of Labor to supply for a return should be shown.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. TURRIALBA.

sailing from

CORTES, HONDURAS; & PTO BARRIOS, GUATEMALA #935

Arriving at Port of PHILADELPHIA

JUNE 9th

1935

| No.<br>on<br>List | NAME IN FULL                              |            | AGE     | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND DATE OF CITIZENSHIP OF COUNTRY<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES      |
|-------------------|-------------------------------------------|------------|---------|-----|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------|
|                   | FAMILY NAME                               | GIVEN NAME | Yrs Mos |     |                                                                                                                                          |                                                                                                                          |                               |
| 1                 | MACIS                                     | HADY.      | 39 -    | F   | M SMITHSBURG, MARYLAND. Feb 1st 1896                                                                                                     | DISTRICT COURT OF BALTIMORE, Sep 21 1931                                                                                 | 2816 Baker St. Baltimore. Md. |
| 2                 | Admitted at Philadelphia June 9, 1935     |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 3                 | with infant son, shown on alien manifest. |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 4                 | Neurologist                               |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 5                 | Immigrant Inspector                       |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 6                 |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 7                 |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 8                 |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 9                 |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 10                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 11                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 12                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 13                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 14                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 15                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 16                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
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| 25                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
| 26                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |
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| 30                |                                           |            |         |     |                                                                                                                                          |                                                                                                                          |                               |

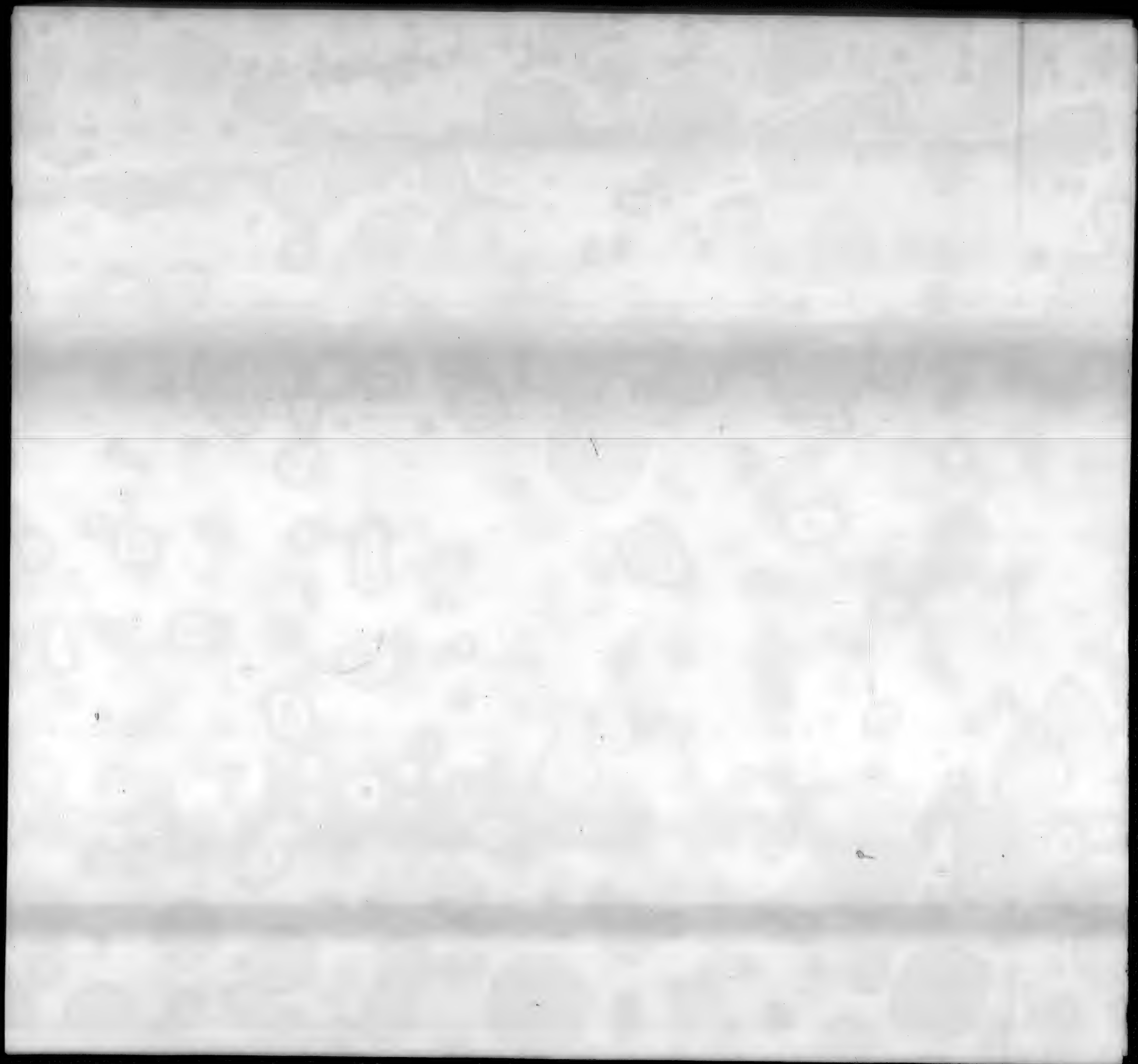
W. A. and  
Master.

77

Line UNITED FRUIT COMPANY  
Owners " " "  
Local Agents " " "

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Am.* S. S. CAPULIN sailing from Dundee, Scotland, May 29, 1935, Arriving at Port of Philadelphia, June 14, 1935, 1935

| No. on List | NAME IN FULL             |             | AGE  | Sex | MARRIED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS  | ADDRESS IN UNITED STATES         |
|-------------|--------------------------|-------------|------|-----|-------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------|
|             | FAMILY NAME              | GIVEN NAME  |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 1           | Lewis                    | Gertrude B. | 52 3 | F   | M                 | March 23, 1883<br>Baltimore, Md.                                                                                                   | American passport # 397722<br>issued Wash. D.C. 6/4/31 - extended<br>to June 4, 1935 - Extension # 3301 | 604 Kingston Road, Baltimore Md. |
| 2           | Admitted at Philadelphia |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 3           | June 15, 1935            |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 4           | Lieut. A. Marine         |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 5           | Immigrant Inspector      |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 6           |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 7           |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 8           |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 9           |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 10          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 11          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 12          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 13          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 14          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 15          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 16          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 17          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 18          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 19          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 20          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 21          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 22          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 23          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 24          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 25          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 26          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 27          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 28          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 29          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |
| 30          |                          |             |      |     |                   |                                                                                                                                    |                                                                                                         |                                  |

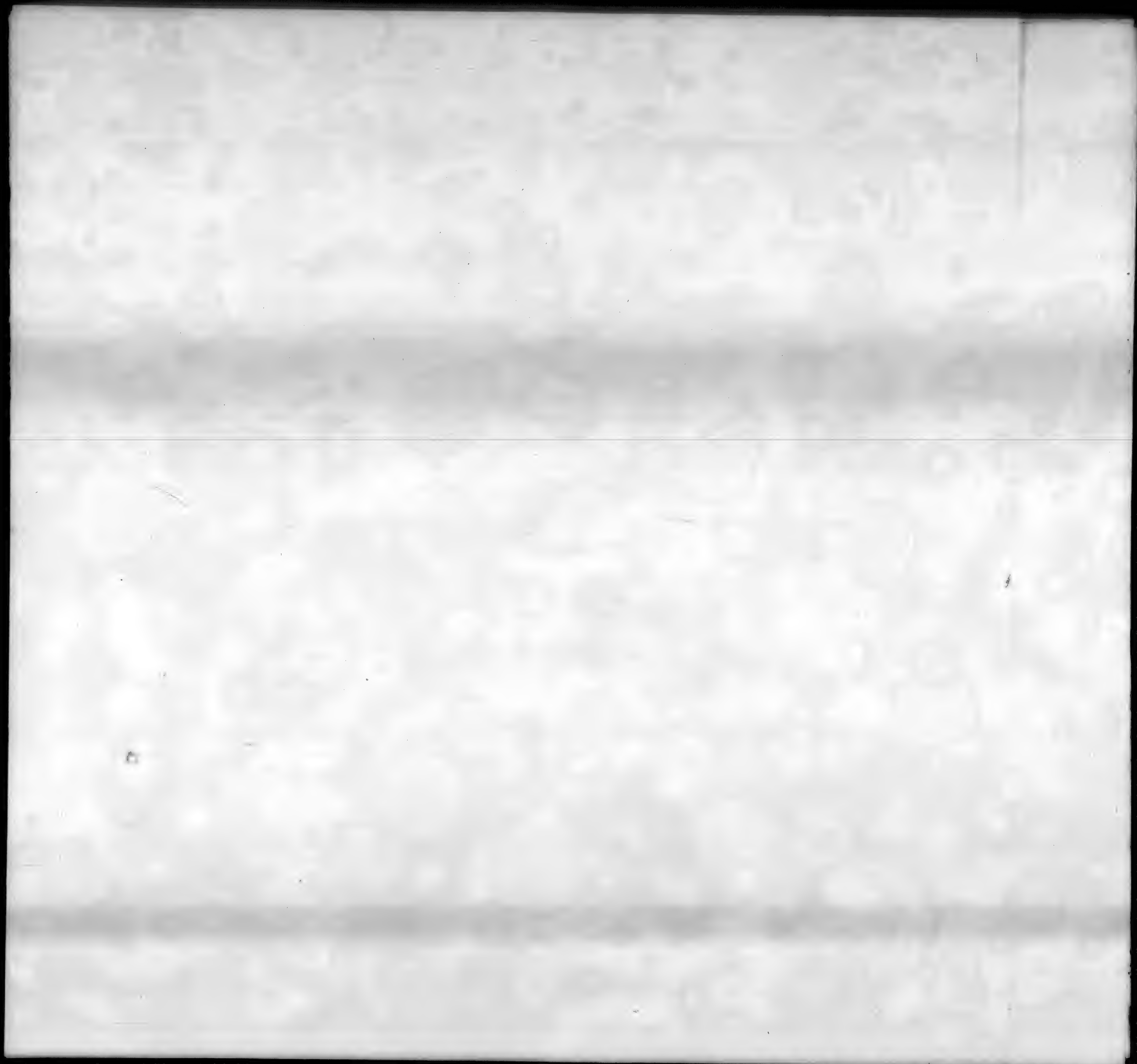
*Elwicks  
Wash D.C.*

-78-

Line American Hampton Roads Line  
Owners U.S. Shipping Board  
Local Agents Mc Cormick S.S. Co.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
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4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of continental United States from a foreign port, a port of continental United States, or a port of another insular possession.

Number **1**

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Number*  
S. S. "TIVIVES"

sailing from PUERTO BARRIOS, GUATEMALA, JUNE 9th, 1935, Arriving at Port of PHILADELPHIA, PA. - JUNE 16th, 1935.  
*via Charleston, S.C.*

| No.<br>ON<br>LIST                                          | NAME IN FULL |            | AGE | Sex | Status | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|------------------------------------------------------------|--------------|------------|-----|-----|--------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                                                            | FAMILY NAME  | GIVEN NAME |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| PASSENGERS EMBARKED AT PHILADELPHIA, PA. - JUNE 3rd, 1935. |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| ✓                                                          | Beach        | Helen E.   | ✓25 | F   | S      | November 27th, 1909. - Mansfield, Pa.                                                                                                    |                                                                                                             | 718 N. Elmer St., Sayre, Pa.            |
| ✓                                                          | Bonsall      | Patricia   | ✓22 | F   | S      | March 29th, 1913. - Philadelphia, Pa.                                                                                                    |                                                                                                             | 44 Spruce Hill Court, Philadelphia, Pa. |
| ✓                                                          | Doughton     | Margaret   | ✓25 | F   | S      | June 1st, 1910. - Phoenixville, Pa.                                                                                                      |                                                                                                             | 101 Sherwood St., Mansfield, Pa.        |
| ✓                                                          | Officer      | Vivienne   | ✓29 | F   | S      | November 22nd, 1905. - Philadelphia, Pa.                                                                                                 |                                                                                                             | 7442 Rogers Ave., Bywood, Pa.           |
| ✓                                                          | Priestley    | Anna M.    | ✓45 | F   | S      | March 20th, 1890. - Mt. Pleasant, Mich.                                                                                                  |                                                                                                             | 1415 Chapin St., Washington, D.C.       |
| ✓                                                          | Turnbull     | Arthur P.  | ✓53 | M   | M      | July 5th, 1881. - Mauricetown, N.J.                                                                                                      |                                                                                                             | 34 Aberdeen Pl., Woodbury, N.J.         |
| ✓                                                          | Turnbull     | Anna E.    | ✓51 | F   | M      | November 15th, 1883. - Woodbury, N.J.                                                                                                    |                                                                                                             | do. do.                                 |
| ✓                                                          | Wood         | Clinton W. | ✓35 | M   | M      | November 8th, 1899. - Duluth, Minn.                                                                                                      |                                                                                                             | 18245 Charlevoix St., Detroit, Mich.    |
| ✓                                                          | Wood         | Gladys E.  | ✓30 | F   | M      | November 24th, 1904. - Cleveland, Ohio                                                                                                   |                                                                                                             | do. do.                                 |
| 10                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 11                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 12                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 13                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 14                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 15                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 16                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 17                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 18                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 19                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 20                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 21                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 22                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 23                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 24                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 25                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 26                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 27                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 28                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 29                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |
| 30                                                         |              |            |     |     |        |                                                                                                                                          |                                                                                                             |                                         |

*7. Fully admitted*  
*...*

71-

Line United Fruit Company,  
Owners United Fruit Steamship Corporation,  
Local Agents United Fruit Company.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "Limon"

sailing from Tela Honduras

June 13th

19 35, Arriving at Port of

Charleston S.C.

June 17th

19 35

Philadelphia Pa June 19, 1935

| No.<br>on<br>List | NAME IN FULL |                          | AGE | Sex | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|--------------------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME               |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 1                 | WATKINS      | ESTELLE                  | 45  | F   | M                    | May 13th 1885 Thurston Md                                                                                                                | American passport # 305215<br>issued Wash D.C. 8/4/35                                                       | Monrovia, Md             |
| 2                 | GARRETSON    | LAURA                    | 24  | F   | S                    | March 23rd 1910. Darlington Maryland                                                                                                     | Am passport #143502<br>issued August 22, 1934 at Wash. D.C.                                                 | Darlington Maryland      |
| 3                 |              | Admitted at Philadelphia |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 4                 |              | June 19, 1935            |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 5                 |              | George D. Harman         |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 6                 |              | Immigrant Inspector      |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 7                 |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 8                 |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 9                 |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 10                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 11                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 12                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 13                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 14                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 15                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 16                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 17                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 18                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 19                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 20                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 21                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 22                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 23                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 24                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 25                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 26                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 27                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 28                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 29                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |
| 30                |              |                          |     |     |                      |                                                                                                                                          |                                                                                                             |                          |

C C Hall  
Master

-80-

Line UNITED FRUIT CO

Owners UNITED FRUIT CO NEW YORK

Local Agents UNITED FRUIT CHARLESTON S.C.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Hond.*  
*S. S.* *GLADDA* Sailing from *ALVARO ORRISON, MEXICO.*, *JUNE 11th*, *1935*, Arriving at Port of *Philadelphia, Pa.* *June 17th*, *1935*

| No.<br>List | NAME IN FULL |             | AGE  |      | SEX | MARRIAGE<br>on Board | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF FILING | ADDRESS IN UNITED STATES                                                                    |
|-------------|--------------|-------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
|             | Family Name  | Given Name  | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 1           | LERNER       | Henry       | 25   | 4    | M   | M                    | Chelsea, Mass., <i>Feb. 1910</i>                                                                                                         |                                                                                                             | <i>24 Arlington St. Newton, Mass.</i><br><del><i>950 Harrison Ave., Boston, Mass.</i></del> |
| 2           | LERNER       | Helen Ruth  | 23   | 8    | F   | M                    | Revere Mass., <i>Sept. 19th 1911</i>                                                                                                     |                                                                                                             | <i>24 Arlington St. Newton Mass</i>                                                         |
| 3           | REGAN        | Selma       | 26   | 4    | F   | S                    | Newark, N.J. <i>Feb. 7th 1909</i>                                                                                                        |                                                                                                             | <i>301. 6 Ave., Newark N.J.</i>                                                             |
| 4           | RIZZ         | Margaret E. | 27   | 7    | F   | S                    | New York N.Y. <i>Nov. 10th 1907</i>                                                                                                      |                                                                                                             | <i>41 West 53St N.Y.C.</i>                                                                  |
| 5           |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 6           |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 7           |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 8           |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 9           |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 10          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 11          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 12          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 13          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 14          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 15          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 16          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 17          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 18          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 19          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 20          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 21          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 22          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 23          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 24          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 25          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 26          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 27          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 28          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 29          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |
| 30          |              |             |      |      |     |                      |                                                                                                                                          |                                                                                                             |                                                                                             |

*Lee B. Dolch*  
U. S. IMMIGRANT INSPECTOR

*Master*

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

"Amer." S. S. Malay sailing from San Juan, Puerto Rico, June 12, 1935, Arriving at Port of Philadelphia, Pa. June 18, 1935

| No. | NAME IN FULL | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-----|--------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|
|-----|--------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|

|   |                     |    |   |   |                                      |                                    |                                    |
|---|---------------------|----|---|---|--------------------------------------|------------------------------------|------------------------------------|
| 1 | Laquer Felipe       | 18 | m | S | Mayaguez, Puerto Rico. June 29, 1916 | 1701 Madison Ave., New York, N.Y.  |                                    |
| 2 | Ferrer Ramon Alicea | 19 | 2 | m | S                                    | Ponce, Puerto Rico. April 16, 1916 | 115 Lexington Ave., New York, N.Y. |

Lee B. Dolch  
U. S. IMMIGRANT INSPECTOR

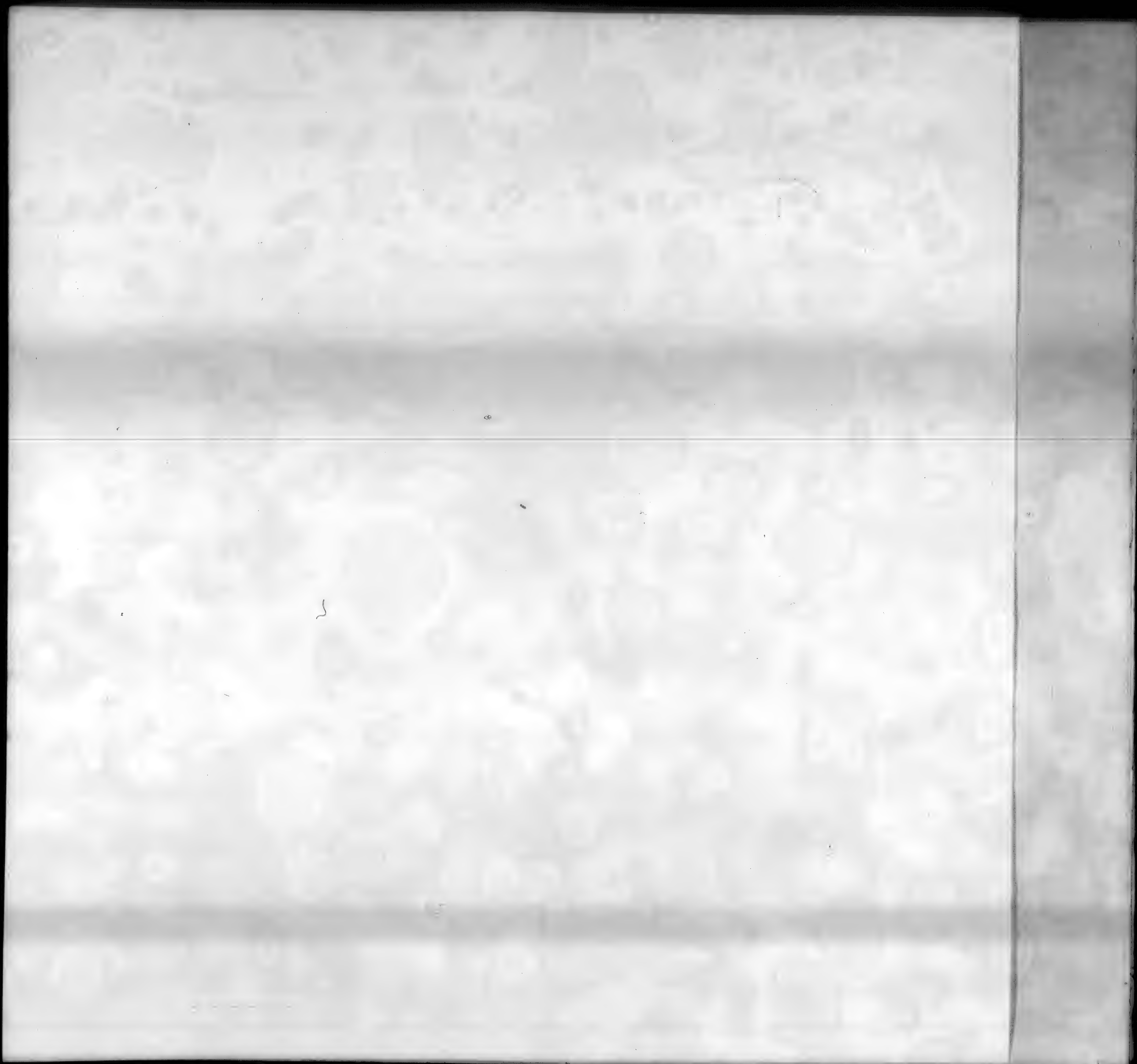
See file #4399/52 - June 18, 1935

J. M. Dody  
Inspector

- 82 -

IMPORTANT NOTICE. 1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Dr. Gustavo Otero, Surgeon of the Trinidad Govt.  
 solemnly, sincerely, and truly swear that I have had four  
 years' experience as a Physician  
 and Surgeon, and that I am entitled to practice as such by and under the authority of Trinidad Govt.  
 and that I have made a personal examination of  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets,  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this 11th day of June, 19  
 at Las Pueras, Nuy.

*[Signature]*  
 (Seal of the United States Department of Commerce and Navigation)

NOTE: If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
 If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some duly authorized immigration officer.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russians).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish-American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and shall be required to furnish such information as may be required by the United States Customs Service for the purpose of determining the admissibility of such aliens into the United States.

3582

S. S. Telford

Passengers sailing from Las Piedras, Venezuela

19

|                          |   |
|--------------------------|---|
| Total passengers . . . . | 1 |
| U. S. citizens . . . .   | 1 |
| Aliens . . . .           | 0 |

\* Permanent residence within the meaning of this manifest shall be taken as intended residence of ...  
† List of races will be found on the back of this sheet.



STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer

**FIRST-CABIN PASSENGERS ONLY**

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia

, June 19, 1935

[illegible]

**Note.** Full text of question 8 is as follows: Whether a person who helps in or advocates the execution by force or violence of the Government of the United States or of all forms of law is substantially similar to persons opposed to national government or who advocate the extermination of public officials, or who disseminate or teach the individual characteristics of a particular U.S. official with the intent of inciting contempt and teaching aid in or opposition to organized government or such teaches the individual destruction of a particular U.S. official, or who advocates or teaches the physical possession of property of the individual resulting in killing of said officer or officers, collected specific individuals or of officers generally, of the Government of the United States or of any other national government because of his or their official character.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

LIST OF UNITED STATES CITIZENS  
FOR THE IMMIGRATION AUTHORITIES

Am m/s  
S.S. sailing from Las Piedras, Venezuela, June 12th, 1935, 192, Arriving at Port of Philadelphia, June 19th, 1935, 192

| No. on List | NAME IN FULL<br>Family Name Given Name | AGE<br>Yrs. Mos. | Sex | Married or | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                      |
|-------------|----------------------------------------|------------------|-----|------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| 1           | Bracken Dean A.                        | 42 9             | M   |            | 9-3-94 Pittsburgh, Pa.                                                                                                          | Am. passport # 672403<br>iss. 3/1/29                                                                  | 3760-80th St. Jackson Heights, L. I. New York |
| 2           | Bracken Irene W.                       | 33 6             | F   |            | 11-16-91 Washington, Ind.                                                                                                       | Am. passport # 32247<br>iss. 3/15/34                                                                  | " " " " "                                     |
| 3           | Bracken Barbara                        | 5 10             | F   |            | 9-16-29 New York, N. Y.                                                                                                         | " " " " "                                                                                             | " " " " "                                     |
| 4           | Hughes Joseph E.                       | 44 2             | M   |            | 4-13-91 Phoenixville, Penna.                                                                                                    | Am. passport # 38<br>iss. 6/6/29                                                                      | 401 Fifth Ave., S., St. Cloud, Minn.          |

Admitted at Philadelphia

June 17, 1935

George S. Marine

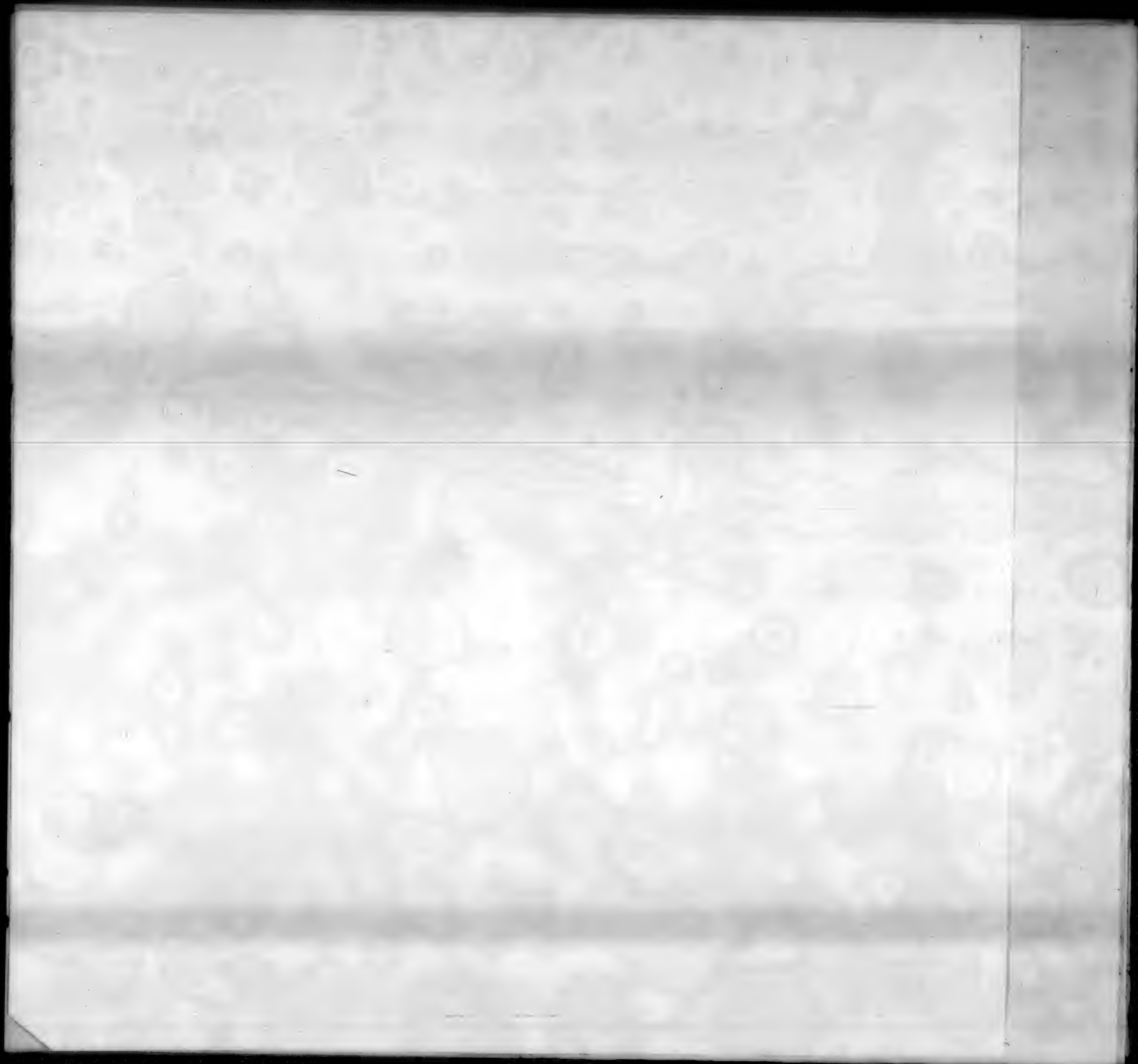
Immigrant Inspector

John S. L. Charles  
Master

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IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Albert L. Kelson, Surgeon of the United States, do solemnly, sincerely, and truly declare that I have had fifteen years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Maracaibo Board, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

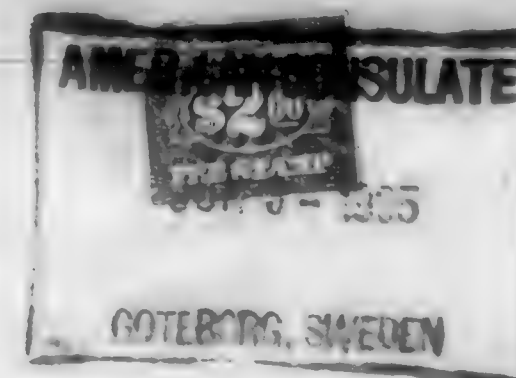
Albert L. Kelson

Sworn to before me this 3rd day of June, 1935  
at Göteborg, Sweden

Robert Harnden  
Consul of the United States of America

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

Service No. 808  
for \$2.00 = R. C.



## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



I, Mont K. Pearson, Surgeon of the 4th Regt,  
solemnly, sincerely, and truly declare - that I have had fifteen  
and Surgeon, and that I am entitled to practise in such capacity under the authority of Florida  
Board, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing lists of unfit Shore,  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this 3rd day of June  
at Göteborg, Sweden.

Robert Harnden  
Consul of the United  
States of America

Where, in a consignment sale with the consent of the Director of Consignment Sales, a consignment sale is made, the sale is deemed to be a consignment sale and the sale is deemed to be a consignment sale.

January 10 1900

AMERICAN CONSULATE

<sup>6</sup> "Race of people" is to be understood in the broad sense which also encompasses the languages they speak. The common language found in the books of the missionaries, the common target of the work of the missionaries, is the official language.

|                  |                   |                                 |
|------------------|-------------------|---------------------------------|
| African (black), | Guinea,           | Roanoke,                        |
| Armenian,        | Hungary,          | Rumanian,                       |
| Babalanian,      | Indonesian,       | Siamese,                        |
| Bosnian,         | Iranian,          | Spanish (New States),           |
| Bulgarian,       | Irish (Scottish), | Swedish (Saxons),               |
| Chinese,         | Italian (Sicily), | Swedish,                        |
| Croatian,        | Japanese,         | Syrian,                         |
| Cuban,           | Korean,           | Tahitian,                       |
| Dalmatian,       | Lebanese,         | Tamilian,                       |
| Dutch,           | Libyan,           | Tatarian,                       |
| East Indian,     | Madagascan,       | Spanish American,               |
| Finnish,         | Montenapian,      | Swiss,                          |
| French,          | Moroccan,         | Turkish,                        |
| Flemish,         | Pacific Islander, | Welsh,                          |
| French,          | Polish,           | West Indian (other than Cuban), |
| German,          | Portuguese,       |                                 |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and to the payment of a fee of \$1.00 per person, for the purpose of determining the admissibility of such aliens into the United States. This pink sheet is for the listing of

۱۰۰

M\$. S. MALAREN

Passengers sailing from WESTERBORG, Sweden, JUNE 30, 19

|                          |   |
|--------------------------|---|
| Total passengers . . . . | 1 |
| U. S. citizens . . . .   | 0 |
| Aliens . . . .           | 1 |

\* The numbers listed were written by the processor of the group. Each sheet has one number printed vertically along its right margin.  
† First names will be typed on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

FIRST-CLASS PASSENGERS ONLY

Arriving at Port of PHILADELPHIA, Pa -

June 19, 1935

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination                    | By whom was passage paid? | Whether ever before in the United States, and if so, when and where? | Whether point to join a relative or friend, state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Condition of health, mental and physical | Deformed or crippled, Nature, length of time, and cause | Height       | Color of   | Marks of identification |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|------------------------------------------|---------------------------------------------------------|--------------|------------|-------------------------|
|             |                                                                                                                                                            | Foreign country, State, City or town | State, City or town       | Yes, No, Year or period of years, Where?                             | Yes, No, Address                                                                                                 | Yes, No, Address                   | Yes, No              | Yes, No              | Yes, No                                  | Yes, No                                                 | Feet, Inches | Hair, Eyes |                         |
| 1           | Life - Mrs. M. J. Miller<br>Helsingfors, Sweden<br>CARL MOLLER, 115 E. 1st St.                                                                             | Sweden                               | NEW YORK                  | 29/7                                                                 | Friend - MAYOR JOHN F. HARRIS<br>NEW YORK                                                                        | 15 14                              |                      |                      |                                          |                                                         |              |            |                         |
| 2           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 3           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 4           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 5           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 6           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 7           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 8           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 9           |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 10          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 11          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 12          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 13          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 14          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 15          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 16          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 17          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 18          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 19          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 20          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 21          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 22          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 23          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 24          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 25          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 26          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 27          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 28          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 29          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 30          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 31          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 32          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 33          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 34          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 35          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 36          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |
| 37          |                                                                                                                                                            |                                      |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                          |                                                         |              |            |                         |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

"Amer."  
S. S.

"TURRIALBA"

sailing from

Barrios, Guatemala

PORTS AS LISTED BELOW

June 16, 1935

AS BELOW, 19

, Arriving at Port of

PHILADELPHIA, PENN. JUNE 23, 1935

| No.<br>on<br>List | NAME IN FULL         |                       | AGE           | SEX          | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND PLACE OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                              |
|-------------------|----------------------|-----------------------|---------------|--------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
|                   | FAMILY NAME          | GIVEN NAME            |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 1                 | KASH                 | JOSEPH A.             | 52            | M            | S                    | New Egypt, New Jersey, November 19, 1882                                                                                                 |                                                                                                          | 1819 Arch St, Philadelphia, Pa.                                       |
| 2                 | BROOKS               | ROBERT C.             | 61            | M            | M                    | Piqua, Ohio February 7, 1874                                                                                                             |                                                                                                          | 104<br>140 Cornell Av, Swarthmore, Pa.                                |
| 3                 | <del>RAMON ROY</del> | <del>CHARLES M.</del> | <del>54</del> | <del>M</del> | <del>M</del>         | <del>PASSENGER EMBARKED AT CHARLESTON, S.C., JUNE 21, 1935</del>                                                                         | <del>PASSENGER EMBARKED AT PHILADELPHIA, PENN. JUNE 10, 1935</del>                                       | <del>c/o United States Quarantine<br/>Station, Charleston, S.C.</del> |
| 4                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 5                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 6                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 7                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 8                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 9                 |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 10                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 11                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 12                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 13                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 14                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 15                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 16                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 17                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 18                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 19                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 20                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 21                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 22                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 23                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 24                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 25                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 26                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 27                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 28                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 29                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |
| 30                |                      |                       |               |              |                      |                                                                                                                                          |                                                                                                          |                                                                       |

Lee B. Golch

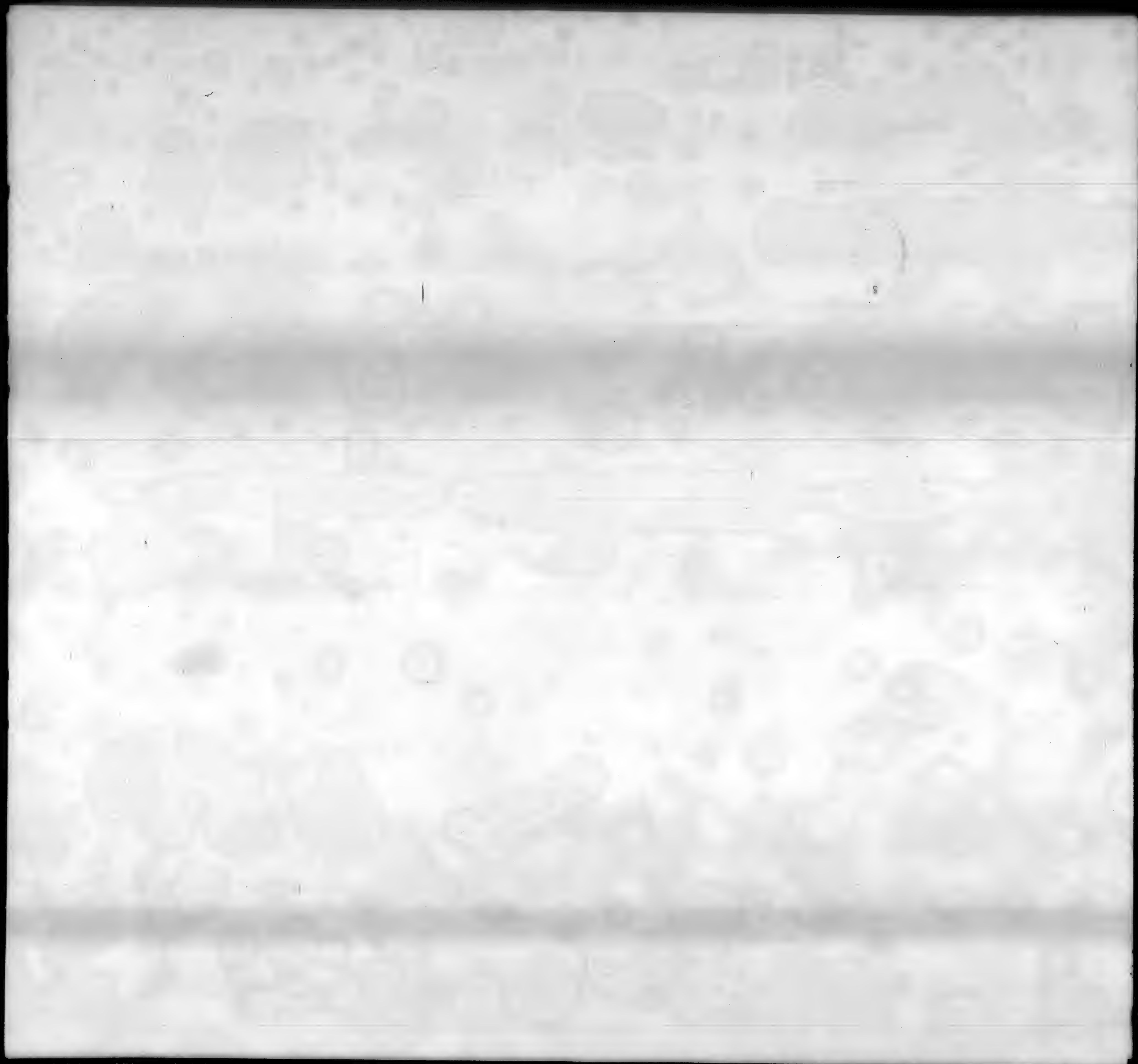
1. INSURANT INSURANCE

- 86 -

Line UNITED FRUIT  
Owners UNITED FRUIT S.S. CORP.  
Local Agents UNITED FRUIT CO.

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, *William F. H. Surgeon* of the *State of Pennsylvania*, do solemnly, sincerely, and truly *swear* that I have had *thirty* years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of *State of Pennsylvania*, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, *two* in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this *10th* day of *June*, 19*12*  
at *Philadelphia, Pa.*

*L. B. Clark*  
U. S. IMMIGRANT INSPECTOR

Note.—If a surgeon sails with the vessel, this affidavit of compliance shall be executed before departure, and at the port of arrival and any changes therein shall be made before the vessel's departure. If the surgeon sails with the vessel, the affidavit of compliance shall be executed at the port of departure, and any changes therein shall be made before the vessel's departure.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification; the mother tongue to be used only to assist in determining the original stock.

|                |                   |                                               |
|----------------|-------------------|-----------------------------------------------|
| African-black. | Greek.            | Romanian.                                     |
| Armenian.      | Hebrew.           | Russian.                                      |
| Balkanian.     | Herzegovinian.    | Ruthenian-Russmak.                            |
| Bosnian.       | Hill.             | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.     | Italian-North.    | Scotch.                                       |
| Chinese.       | Italian-South.    | Serbian.                                      |
| Croatian.      | Japanese.         | Slovak.                                       |
| Cuban.         | Korean.           | Slovenian.                                    |
| Dalmatian.     | Latvian.          | Spanish.                                      |
| Dutch.         | Magyar.           | Spanish-American.                             |
| East Indian.   | Mexican.          | Syrian.                                       |
| Finnish.       | Montenegrin.      | Turkish.                                      |
| French.        | Moroccan.         | Welsh.                                        |
| German.        | Pacific Islander. | West Indian (other than Cuban).               |
|                | Polish.           |                                               |
|                | Portuguese.       |                                               |







## List

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia, Pa. , June 23, , 1935

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(Indicate country, territory, possession, etc.)</small> | By whom was passage paid? | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States                                | Whether a polygamist | Whether an anarchist | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of<br>Complexion<br>Hair<br>Eyes | Marks of identification |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------|-------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------|----------------------|------------------------------------------|---------------------------------------------------------|--------------------------|----------------------------------------|-------------------------|
| 1           | Mrs. John Rosmini<br>41-45 52nd Street<br>Woodside, L.I., N.Y.                                                                                             | Woodside<br>N.Y., L.I., N.Y.                                                        | Self                      | Yes                                                   | Yes                                                                  | 1915 Woodside, L.I., N.Y.<br>1935 Woodside, L.I., N.Y.                                                           | Wife, Mrs. John Rosmini<br>41-45 52nd St.<br>Woodside, L.I., N.Y. | no                   | Yes                  | Yes                                      | good                                                    | 5 10 1/2                 | brn                                    | brn                     |

Notes: Full text appears in Spanish below. Whether a person who believes in or advocates the overthrow of the Government of the United States of all forms of law, including businesses, is a threat to national security, is not addressed by the Constitution or public laws, or when advocates teach the unlawful destruction of property, even a member of parliament with no criminal record, and has no evidence to suggest that he or she advocates or promotes the overthrow of the Government of the United States, does not teach the unlawful destruction of property, or when advocates teach the destruction, seizure, or property of the individual, business, or living thing, other soldiers, officers or soldiers, officers or specific individual or officers generally, of the Government of the United States, does any other organized government because of his or her official character.

Line  
Owners  
Local Agents



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, John A. Smith, of the U. S. Army, from San Francisco, do solemnly swear that I have caused the surgeon of said vessel sailing therein, or the surgeon employed by the owner thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifests, in number, and that from the report of said surgeon and from my own investigation, I believe that none of said aliens is of any of the classes excluded from admission to the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sum to before me this  
at Philadelphia, Pa.

23rd

day of

June

, 1935

Officer.

Lee B. Dolch  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1952; and also recording on separate manifests those aliens traveling in the third class and the second tourist class, whose visas bear the initials of Technical Ad-3, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the passengers are recorded.

Column 2 (*Head tax plate*).—Stone top line, 8 1/2 in. and width, 1 1/2 in. to 1 3/4 in. The space is for use of Government or owner only.

Column 4 (Age). The age (in years) of the respondent should be expressed in years (e.g., 18). The father applying for the child under 1 year of age.

Column 5 (Sex). The entry should be either M (male) or F (female).

Column 6 (Marital status). If the father is married, S (single), or D (divorced), or U (unmarried).

\* Column 7 (*Working or not working*). The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived in the sample. (For instance, "factory worker" is not acceptable; however, "auto engine mechanic" is preferred.) If a worker, then another, good thing to do, and not simply be whether, e.g., "auto worker, or other job with designation".

A distinction should be made between farmers and farm laborers, consisting of the subject of money wages, as follows:

Some military matters should make only a distinction on the passport, and consular should be made, if necessary, by consular and registry clerks during the passport examination of alien arrivals.

Comment 8: *Editorial board and referees*—This column is subdivided and contains the following questions: "Read and rate" (rating for, if exemption is claimed, upon a 5-point scale); "To answer this question the language or details this item is able to reflect clearly be stated" (if often is unclear or need, claims exemption from the rating requirement); the criteria for such exemption should be given.

(Column 9) *Notwithstanding*—Question 2 should be considered to mean the foreign  $\neq$  which when is a citizen or subject.

Column 10 *Name of printer*—See list of names printed on back of this sheet. The entry should show the name of printer as given by said list.

Special attention should be paid to the classification of alien races and the countries of birth of alien subjects, groups of last permanent residence, and country of birth, and foreigners should be especially noticed by inspectors and registry clerks in this regard. The numbers of "Foreigners" are, therefore, under the head of countries does not mean "Foreigners" or people of other descent, "Foreign" appearing under the head of race or nationality does not mean "Foreign" by country. As Irish, German, or Russian alien by race and properly come under the heading of England, Switzerland, or any other country. In all cases here the following definitions should be especially observed:

## HATHAN (SOULHI)

The people who are native to that portion of Italy south of the border of the Kingdom of the Two Sicilies, comprising of Liguria, Tuscany, the Marches, Abruzzi, Kingdom of Naples, and Molise, Campania, Apulia, Piedmont, Calabria, Sicily, and Sardinia and those countries should be classed as Italian (southern).

Column 11 (*Place of birth*).—The State, Province, or District of birth should be given in addition to the city or town.

(column 12) Serial number of the document presented; - PROX serial number of document with abbreviation ("QIV," "SupIV," "P.V." or "RP," see also caption); to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1921 involved, or Section 4 (a).

Column 13.—This question has reference to the place and date of birth of the applicant described in column 12, and is self-explanatory.

Case 14 (1 or 2 answers; 1 or 2 eq. etc.) — Shorthand (1 or 2 word) high school in this column. The space is for no. of Government school and

Column 15 (*Lost permanent residents*). Arrival of an individual as a resident of one year shall constitute permanent residence. The last country to which entry is made, with the intention of remaining one year or more shall be the last permanent residence regardless of the date of actual residence therein. The entries in column 15 should be in the country of origin or former residence, province, or district of last permanent residence. It is important for statistical purposes that steps be comparable and entries of last permanent residence be independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning to the United States and should be recorded in United States.

Column 17 *Age and sex of alien's relatives are listed in separate column (see column 18).* The entry should give name, exact relationship, and a number.

Address of one's relative. If one's relative is living, give name, phone number, job, and address of relative. If one's relative is dead, give name, date of death, and address of relative. If one's relative is living in a country where one cannot give name, job, and address, give name of relative or friend in country of birth and address of relative. If one's relative is living in a country where one cannot give name, job, and address, give name of relative or friend in country of birth and address of relative. If one's relative is living in a country where one cannot give name, job, and address, give name of relative or friend in country of birth and address of relative.

(Column 18 *United States*). The answer to this question shall show whether intended future permanent residence is an intended residence of one year or less, or future permanent residence. The answer shall show definitely the place of intended intended future permanent residence if within the United States country, if not the United States, and next of intended country.

Colman 19 (*Whether having a ticket to such final destination*). The answer must be either Yes (ticket) or No (no ticket).

Column 20 (*for whom was passage paid*). The entry should show, for each person, for whom passage was paid, of self; husband, father, brother, or other person; or of the Steamship company, etc.

Column 21 *Whether in possession of \$25, and if less, how much*. This is to be filled in each case (individual or family) with the exact amount of money in the hands of the head of a family should not be filled in for the second and last of the family.

Column 22 (*Whether ever before in the United States*)—and Column 23 (*Date of last departure*). The entries should show whether the alien has ever been in the United States before; and if so, the year or period of time he had previously resided in Philadelphia. Where in the United States areas they came from, such as New York, Pennsylvania, etc., may also be given, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to visit relative or friend*). If  $rel = 1$ , then  $rel\_vis = 1$  if whether going to visit either a relative or friend, with  $rel\_vis = 0$  if not. If a relative, the exact relationship.

Comments 24 to 26. These questions are in effect exploratory, and the answers are given by others on the sheet, so subject to revision by inspection of the data in the questionnaire tables. However, in answering question 26, it does not become clear that the data are correct within one hour and the secretaries of Essex has unfortunately been too sloppy for admission, the authority for such responsibility should be given.

The people who live in the basin of the River Po in northern Italy (i. e., *popoli della pianura*)—Friarini, Lombardi, Venetian and Emilian and their descendants—whether they are living in Italy, Switzerland, America, or any other country, should be classed as Italian people. Most of these people speak a Gallic dialect of the Italian language.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Head-*  
S. S.

GATUN

Sailing from *Alvaro Obregon, Mexico*, 19<sup>36</sup>, Arriving at Port of *Philadelphia, Pa.* June 23, 19<sup>36</sup>

| No.<br>on<br>List | NAME IN FULL |                    | AGE |     | Sex | Married<br>or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|-------------------|--------------|--------------------|-----|-----|-----|----------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME         | Yrs | Mos |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 1                 | BURKLE       | MARGARETTE         | 31  |     | F   | M                    | Feb. 21, 1904 Pittsburgh, Pa.                                                                                                          |                                                                                                             | 918 W. St. Clair St. Pittsburgh, Pa. |
| 2                 | BURKLE       | RICHARD            | 30  |     | M   | "                    | Sept. 1, 1904 Pittsburgh, Pa.                                                                                                          |                                                                                                             | 918 W. St. Clair St. Pittsburgh, Pa. |
| 3                 | GLESSNER     | HAZEL              | 43  |     | F   | "                    | May 11, 1892 Tyler, Pa.                                                                                                                |                                                                                                             | 201 Lotus Road, Philadelphia, Pa.    |
| 4                 | GLESSNER     | WILLIAM            | 42  |     | M   | "                    | April 22, 1893 <i>Shanksville, Pa.</i><br><del>Philadelphia, Pa.</del>                                                                 |                                                                                                             | 2001 Lotus Road, Philadelphia, Pa.   |
| 5                 | GOODWIN      | ALLEN              | 28  |     | "   | "                    | Nov. 29, 1906 New York City, N.Y.                                                                                                      |                                                                                                             | 244 E. 12th St. New York City, N.Y.  |
| 6                 | GOODWIN      | ANN                | 24  |     | F   | "                    | June 20, <del>1912</del> <sup>1910</sup> Brooklyn, N.Y.                                                                                |                                                                                                             | 244 E. 12th St. New York City, N.Y.  |
| 7                 | KROUGH       | FLORENCE           | 26  |     | "   | "                    | Nov. 13, 1901 Irvington, N.J.                                                                                                          |                                                                                                             | 109 Braintree Road, Allston, Mass.   |
| 8                 | KROUGH       | JOHN               | 28  |     | M   | "                    | Jan. 24, 1907 Boston, Mass.                                                                                                            |                                                                                                             | 109 Braintree Road, Allston, Mass.   |
| 9                 | McGINLEY     | ROSE               | 37  |     | F   | S                    | Aug. 29, 1898 Danbury, Conn.                                                                                                           |                                                                                                             | 95 Locust Ave., Danbury, Conn.       |
| 10                | ROGERS       | EMILY              | 37  |     | "   | "                    | Dec. 10, 1897 Silverton, Oregon                                                                                                        |                                                                                                             | 43-18 32nd St. Woodside, L.I.N.Y.    |
| 11                | ROGERS       | TALBOT <i>King</i> | 36  |     | "   | "                    | Feb. 15, 1899 Racine, Wisconsin                                                                                                        |                                                                                                             | 4-17 3rd St. Woodside, L.I.N.Y.      |
| 12                | LOSHINI      | LUCIA              | 30  |     | F   | "                    | April 11, 1905 Clayton, New York                                                                                                       |                                                                                                             | 41-45 32nd St. Woodside, L.I.N.Y.    |
| 13                | TAYLOR       | ROBERT             | 31  |     | M   | "                    | Oct. 15, 1903 New York City, N.Y.                                                                                                      |                                                                                                             | 97 Liberty Ave., Belleville, N.J.    |
| 14                |              |                    |     |     |     |                      | <i>Lee D. Bolek -</i>                                                                                                                  | <i>Ready Refd</i>                                                                                           |                                      |
| 15                |              |                    |     |     |     |                      |                                                                                                                                        | <i>June 21, 1936</i>                                                                                        |                                      |
| 16                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 17                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 18                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 19                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 20                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 21                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 22                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 23                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 24                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 25                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 26                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 27                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 28                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 29                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |
| 30                |              |                    |     |     |     |                      |                                                                                                                                        |                                                                                                             |                                      |

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- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.

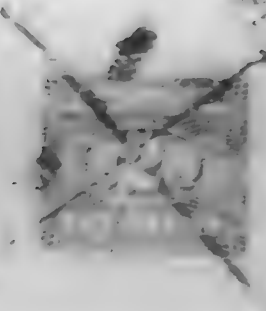
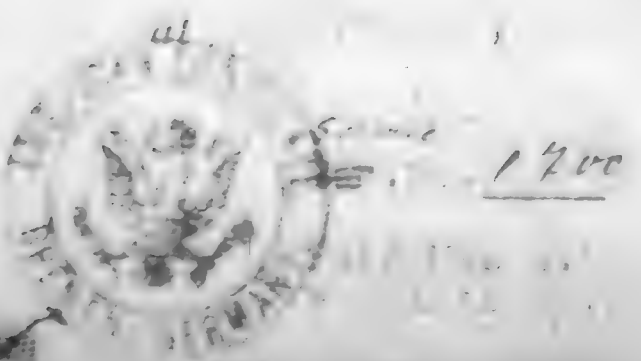






AFFIDAVIT OF SURGEON

I, *A. Fern. E. Jr.* of the County of *York* State of *New York*  
do hereby certify that *near* *the university*  
*of Marburg* *one*  
*A. Fern. E. Jr.*



*J. A. [illegible]*

LIST OF PAGES OR PAGES

|     |     |     |
|-----|-----|-----|
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| 7   | 8   | 9   |
| 10  | 11  | 12  |
| 13  | 14  | 15  |
| 16  | 17  | 18  |
| 19  | 20  | 21  |
| 22  | 23  | 24  |
| 25  | 26  | 27  |
| 28  | 29  | 30  |
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| 37  | 38  | 39  |
| 40  | 41  | 42  |
| 43  | 44  | 45  |
| 46  | 47  | 48  |
| 49  | 50  | 51  |
| 52  | 53  | 54  |
| 55  | 56  | 57  |
| 58  | 59  | 60  |
| 61  | 62  | 63  |
| 64  | 65  | 66  |
| 67  | 68  | 69  |
| 70  | 71  | 72  |
| 73  | 74  | 75  |
| 76  | 77  | 78  |
| 79  | 80  | 81  |
| 82  | 83  | 84  |
| 85  | 86  | 87  |
| 88  | 89  | 90  |
| 91  | 92  | 93  |
| 94  | 95  | 96  |
| 97  | 98  | 99  |
| 100 | 101 | 102 |



# AFFIDAVIT OF SURGEON

I, H. Herun. Lou, Surgeon of the Tokk German Lloyd, do solemnly, sincerely, and truly swear that I have had 18 years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the university of Marburg, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

H. Herun. Lou

Sworn to before me this 5th day of June, 19 35

at Bremen, Germany



Subs. No. 1200

paid Mks 5.20 equal to \$2.00

F.A. Lane  
F.A. Lane,  
Vice Consul of the United States  
of America

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List *Signature*

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United  
This (yellow) sheet is for the listing of

3585

= 1 =

S. S. "GOSLAR"

Passengers sailing from

BREMEN

JUNE, 6th

, 1935

| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL                          |               | Age       | Sex               | Calling or occupation | Able to— |                                                              |       | Nationality.<br>(Country of which citizen or subject) | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number                | Issued  |           | Data concerning verifications of landings, etc.  | Last permanent residence |                                           |
|-------------|-----------------------------------------------------------------------|---------------------------------------|---------------|-----------|-------------------|-----------------------|----------|--------------------------------------------------------------|-------|-------------------------------------------------------|----------------|----------------|-------------------------------------------|--------------------------------------------------------------------------|---------|-----------|--------------------------------------------------|--------------------------|-------------------------------------------|
|             |                                                                       | Family name                           | Given name    | Yrs. Mos. | Married or single |                       | Read     | Read what language (or if exemption claimed, on what ground) | Write |                                                       |                | Country        | City or town, State, Province or District | Prefix number with QV, NVIV, PV, or RP and give section of act involved. | Place   | Date      | This column for use of Government officials only | Country                  | City or town, State, Province or District |
|             |                                                                       | = 1 =                                 |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 1           | See                                                                   | KUSEN                                 | HANS, WILHELM | 36        | M                 | SHIP-OWNER            | Y        | GERMAN                                                       | Y     | GERMANY                                               | GERMAN         | GERMANY        | ALTONA-GROSS-FLOTTBEK                     | PV.S. 3/2 1074                                                           | HAMBURG | 5.17.1935 |                                                  | GERMANY                  | ALTONA-GROSS-FLOTTBEK                     |
| 2           |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 3           |                                                                       | Head Tax Refund Certificate No. 61254 |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 4           |                                                                       | Lichman, Hugh and Ruth Local Agents   |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 5           |                                                                       | Louis P. Nolan                        |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 6           |                                                                       | U. S. IMMIGRANT INSPECTOR             |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 7           |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 8           |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 9           |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 10          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 11          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 12          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 13          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 14          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 15          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 16          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 17          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 18          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 19          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 20          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 21          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 22          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 23          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 24          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 25          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 26          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 27          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 28          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 29          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |
| 30          |                                                                       |                                       |               |           |                   |                       |          |                                                              |       |                                                       |                |                |                                           |                                                                          |         |           |                                                  |                          |                                           |

Total passengers . . . . .

U. S. citizens . . . . .

Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual intended residence of one year or more.  
† If not a race will be found on the back of this sheet.

14-430

*Serial # 283110  
dated 7/1/35  
In - 4*



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer

SECOND-CABIN PASSENGERS ONLY

Arriving at Port of

PHILADELPHIA, PA.

JUN 24 1936

JUN 24 1936

1936

= 1 =

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br>(Intended future permanent residence) | By whom was passage paid? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether coming because of an order | Whether arrested and deported | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of<br>Hair<br>Eyes | Marks of identification         |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|------------------------------------|-------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|--------------------------|---------------------------------|
| 1           | FATHER: EMIL KUSEN KIEFERSTR. 7 - ALTONA-HARBURG/ELBE GERMANY. PHILADEL. GERM. GROSS-FLOTBERK                                                              | ALTONA-HARBURG/ELBE GERM. GROSS-FLOTBERK                   | SELF                      | Y NO                                                                 | BUSINESS FRIEND: FIRM BLIDBERG ROTHCHILD & CO. 5th MOORE STR. NEW YORK CITY, N.Y.                                | Y DAYS NO NO NONO NO NO NONO GOOD  | NO                   | NO                   | NO                                 | NO                            | GOOD                                     | NO                                                      | 6                        | FAIR BL BR               | SCAR ON LEFT CHEEK AND FOREHEAD |
| 2           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 3           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 4           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 5           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 6           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 7           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 8           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 9           |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 10          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 11          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 12          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 13          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 14          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 15          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 16          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 17          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 18          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 19          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 20          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 21          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 22          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 23          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 24          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 25          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 26          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 27          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 28          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 29          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |
| 30          |                                                                                                                                                            |                                                            |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                    |                               |                                          |                                                         |                          |                          |                                 |

Italian Passenger  
Examiner R. A. K.

H. H. S. H. S.  
U. S. S. H. S.

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Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Master, of the SS Corla, from Sumner, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 24 day of June, 1924  
at Philadelphia, Pa.  
Robert P. Wilson  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Adviser, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head-tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (*Sex*).—The entry should be either M (male) or F (female).

Column 6 (*Married or single*).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrived, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (*Ability to read and write*).—This column is subdivided and contains the following question: "Read what language (or, if exemption is claimed, upon what ground)." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Country of birth*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully checked by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Saragines) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*).—Prefix serial number of document with abbreviation "QIV," "XIV," "IV," or "RIV," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Verifications of landing*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*).—The entry should give name, exact relative, and complete address of such relative. If no such relative living in country whence alien came, give name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (*Whether having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom fare passage paid*).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; Steamship company, etc.

Column 21 (*Whether in possession of \$50, and if less, how much*).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States; and if so, when, where, and date of last departure*).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

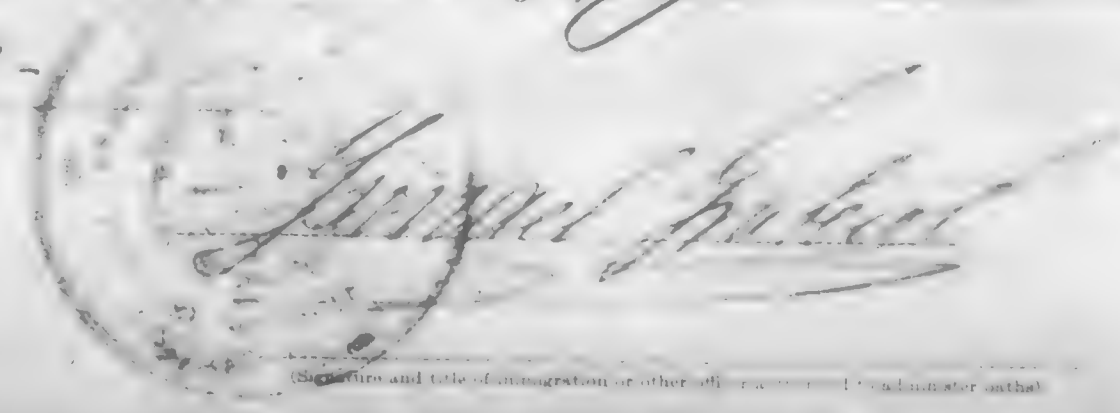
Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



# AFFIDAVIT OF SURGEON

I, L. Gustavo Otero, Surgeon of the Government of Venezuela, do solemnly, sincerely, and truly affirm that I have had 5 years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Gov. of Venezuela, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 17th. day of June, 1935.  
at San Pedro de Macoris  
Otero



Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may hereafter be made on route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusyns).                           |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and shall be required to furnish such information as may be required by the United States Customs Service for the purpose of determining the admissibility of such aliens into the United States.

S. S. 61-3182

Passengers sailing from LOS PEDROS VENEZUELA

15014 18<sup>th</sup>, 1935

|                            |   |
|----------------------------|---|
| Total passengers . . . . . | 5 |
| U. S. citizens . . . . .   | 4 |
| Aliens . . . . .           | 1 |

\* Permanent residence within the meaning of this part listed as being that of interviewees because of change in their list of races was found on the back of this sheet.



STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of San-Juan PA

, JUN 25 1967

, 1955-

[illegible][illegible]



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, S. J. [Signature], of the U. S. S. [Signature], from Las Palmas, do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 25 day of June, 1935 at Philadelphia

[Signature]  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class, and the family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head line entries).—Stemship lines should make no entries in this column. The space is for use of Government officials only.  
Column 3 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.  
Column 4 (Sex).—The entry should be either M (male) or F (female).  
Column 5 (Married or single).—The answer should be M (married), S (single), W (widowed), or D (divorced).  
Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien artist, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel painter, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.  
A distinction should be made between farmers and farm laborers, regardless of the amount of money spent, as follows:  
A farmer is one who operates a farm, either for himself or for others.  
A farm laborer is one who works on a farm for the man who operates it.  
Stemship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of passengers.  
Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Does said language for, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.  
Column 9 (Native born).—Question 9 should be construed to mean the country of which alien is a citizen or subject.  
Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or peoples given in said list.  
Special attention should be paid to the distinction between race and the country of birth, and manifest should be carefully checked by inspectors and registry clerks in this regard. For instance, "French" appearing under the head of country does not mean "French" by race or people, and "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race may properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

**CUBAN**  
The term "Cuban" refers to the Cuban people (not Negroes).  
**WEST INDIAN**  
"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.  
**SPANISH AMERICAN**  
"Spanish American" refers to the people of Central and South America of Spanish descent.  
**AFRICAN (BLACK)**  
"African (black)" refers to the African Negro, whether coming from Cuba or other parts of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

**ITALIAN (NORTH)**  
The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (northern)". Most of these people speak a Gallic dialect of the Italian language.

## ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (southern)".

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.  
Column 12 (Serial number of document presented).—Specify serial number of document with abbreviation "QIV," "NIV," "PVC," or "RP," as appropriate to document, whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1924 involved, as section 4 (a).  
Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Expirations of validity, etc.).—Stemship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or intended residence of one year shall constitute permanent residence. The last country in which alien resided will be the indication of permanent residence. The last country in which alien resided, regardless of length of actual residence therein. The entries in column 15 should cover the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that stemship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded as United States.

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which alien is a citizen or subject. If such country farther than that whence alien came, address should include street and number.

Column 18 (Intend destination).—The answer to this question should show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, city or town, or intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such port of destination).—The answer should be either Yes (checked) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative, friend, or steamship company, etc.

Column 21 (Whether in possession of \$20 and if less how much).—The answer should give in each case (individual or family) the exact amount of money which is money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year, (or period of years) and place (e. g., New York, Philadelphia). Where in the United States more than once previously, indicate last previous entry only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether goes to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address of such relative, the exact relationship.

Columns 24 to 36.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to review by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to apply for admission, the authority for such reapportionment should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Am m/s*  
*S.S. Gulfbird*

sailing from *Las Piedras, Venezuela* June 18th 1935, 19, Arriving at Port of *Philadelphia Pa.* June 25th 1935, 19

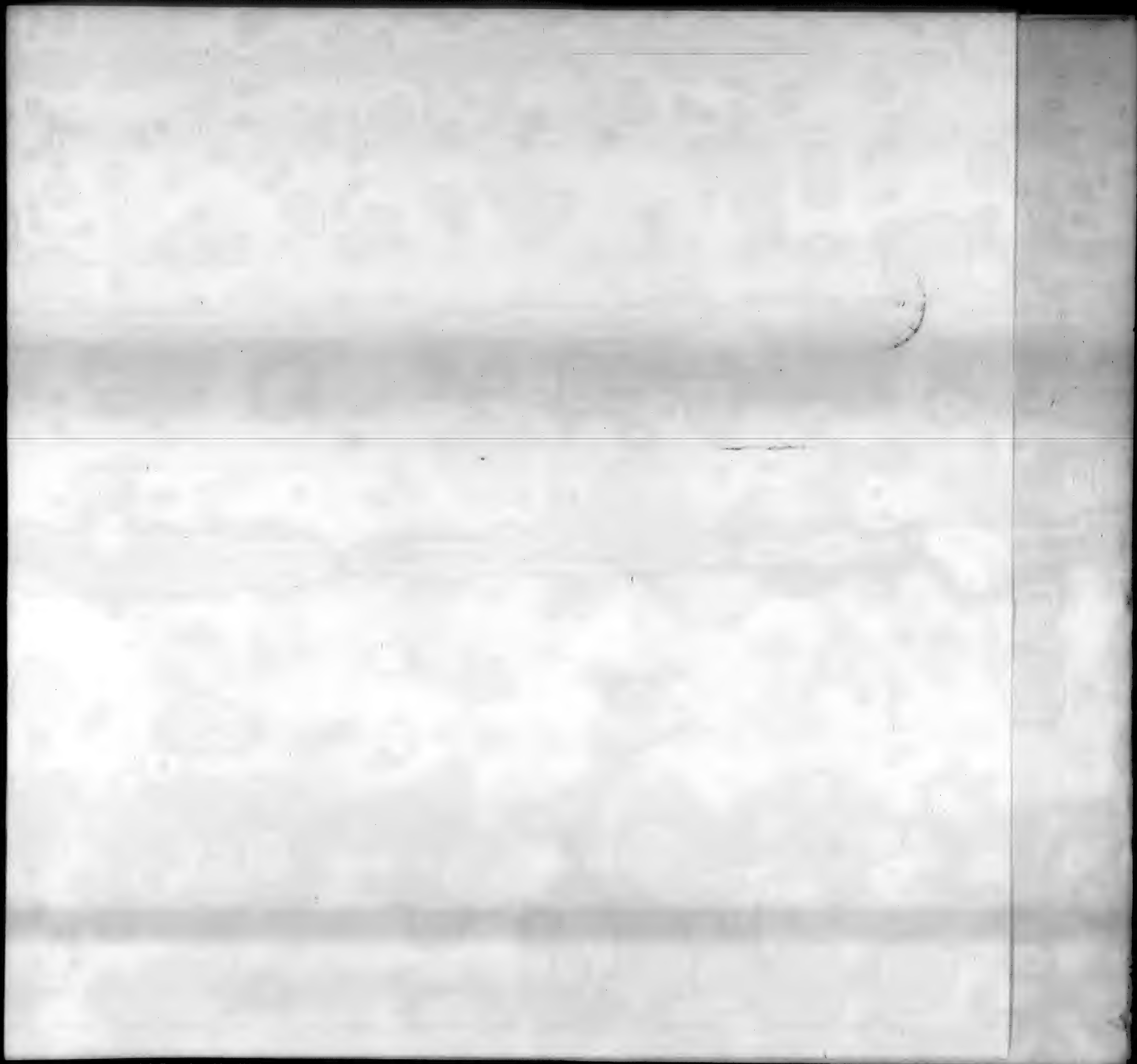
| No.  | NAME IN FULL | AGE            | SEX  | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES     |
|------|--------------|----------------|------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------|
| Last | First Name   | Yrs. Mos.      | Male |                                                                                                                                    |                                                                                                        |                              |
| 1    | Adams        | Anna Sophie    | ✓ 24 | F. M. ✓ Jan. 26th 1911 Quincy Mass.                                                                                                | <i>Am passport # 5838 issued Wash. 7/19/33</i>                                                         | 118 Cranch Str. Quincy Mass. |
| 2    | Sherman      | Katherine F.J. | ✓ 40 | F. M. ✓ Sept. 13th 1894 Helena Montana                                                                                             | <i>Am passport # 1103 issued Feb 4, 1935 at Merced, Cal.</i>                                           | Jamestown R.I.               |
| 3    | Sherman      | Mary Hoyt      | ✓ 8  | 9 F. S. ✓ Sept. 3rd 1926 Newport R.I.                                                                                              |                                                                                                        | Jamestown R.I.               |
| 4    | Sherman      | Katherine F.J. | ✓ 2  | 11 F. S. ✓ July 5th 1932 Newport R.I.                                                                                              |                                                                                                        | Jamestown R.I.               |

*Admitted at Philadelphia June 25, 1935*  
*George A. Marine*  
*Immigrant Inspector*

*630*  
*1935*

- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
  2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Teodoro G. De Cuevo, M. D., Surgeon of the American ss. "BARBARA", sailing therewith, do solemnly, sincerely, and truly swear that I have had three years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners of Maryland, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

T. G. De Cuevo, M.D.

Sworn to before me this 27th day of June, 1935  
at Philadelphia

George A. Marine  
Immigrant Inspector  
(Signature and title of immigration officer authorized to administer oaths)

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed. If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

Form 516 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE  
No. 58592  
Port of Philadelphia, PA, June 27, 1935  
This is to certify that the alien Wanda C. C. C., citizen of Poland and of the Polish race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at Philadelphia, PA, 1933 ex S. S. 14  
Status under Immigration Act of 1921 when admitted Permanent  
Said alien is about to proceed to Philadelphia via the seaport of Philadelphia and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 31; Height, 5-8; Color of hair, Dark; Color of eyes, Dark  
Identifying documents in alien's possession Passport  
Signature of alien Wanda C. C. C.  
Surrendered at Philadelphia, PA to Inspector George A. Marine June 27, 1935

Form 516 ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE  
No. 58590  
Port of Philadelphia, PA, June 27, 1935  
This is to certify that the alien Wanda C. C. C., citizen of Poland and of the Polish race, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at Philadelphia, PA, 1933 ex S. S. 14  
Status under Immigration Act of 1921 when admitted Permanent  
Said alien is about to proceed to Philadelphia via the seaport of Philadelphia and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 31; Height, 5-8; Color of hair, Dark; Color of eyes, Dark  
Identifying documents in alien's possession Passport  
Signature of alien Wanda C. C. C.  
Surrendered at Philadelphia, PA to Inspector George A. Marine June 27, 1935

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russniak).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



## AFFIDAVIT OF SURGEON

I, Theodore J. De Vincois, M. D., Surgeon of the American Dr. Hospital, calling therewith do solemnly, sincerely, and truly swear that I have had three years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the Board of Medical Examiners of Maryland, and that I have made a personal examination of each of the aliens named herein, and that the foregoing List or Manifestation, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 27<sup>th</sup> day of April, 1922.

at Philadelphia

Henry A. Waine

...urgent insistence

[illegible][illegible]

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                   |                   |                                                |
|-------------------|-------------------|------------------------------------------------|
| American (U. S.). | Czech.            | Rumanian.                                      |
| American.         | Hibernic.         | Russian.                                       |
| Balkanian.        | Hungarian.        | Ruthenian (Russo-slavic).                      |
| Bosnian.          | Irish.            | Scandinavian (Norwegian, Danish, and Swedish). |
| Bulgarian.        | Italian (North).  | Scottish.                                      |
| Canton.           | Italian (South).  | Servian.                                       |
| Cantonian.        | Japanese.         | Slovak.                                        |
| Canton.           | Korean.           | Slovenian.                                     |
| Dakotian.         | Lithuanian.       | Spanish.                                       |
| Dutch.            | Magyar.           | Spanish American.                              |
| East Indian.      | Mexican.          | Syrian.                                        |
| English.          | Montenegrin.      | Turkish.                                       |
| French.           | Montan.           | Welsh.                                         |
| German.           | Pacific Islander. | West Indian (other than Cuban).                |
| German.           | Polish.           |                                                |
| German.           | Portuguese.       |                                                |



List One

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the Customs and Border Protection Service of the Department of Homeland Security. This (pink) sheet is for the listing of

S. S.

"BARBARA" (American)

Passengers sailing from San Juan, Puerto Rico

June 22

19 35

| No.<br>on<br>List                                                            | HEAD-TAX<br>STATUS | NAME IN FULL   |                  | Age       | Sex               | Calling<br>or<br>occupation | Able to—<br><br>Read what language (or,<br>if exceptions claimed,<br>on what ground) | Nationality<br>(Country of<br>which citizen<br>or subject) | Race or people | Place of birth |                | Immigration<br>Visa<br>Number | Issued at—     | Date          | Last permanent residence |              |
|------------------------------------------------------------------------------|--------------------|----------------|------------------|-----------|-------------------|-----------------------------|--------------------------------------------------------------------------------------|------------------------------------------------------------|----------------|----------------|----------------|-------------------------------|----------------|---------------|--------------------------|--------------|
|                                                                              |                    | Family name    | Given name       | Yrs. Mos. | Married or single |                             | Read                                                                                 | Talk                                                       |                | Country        | City or town   |                               |                |               | Country                  | City or town |
| 1                                                                            | No head tax paid   | Martinez Perez | José             | 29 7      | M. M.             | Merchant                    | Yes Spanish                                                                          | Yes Spain                                                  | Spanish        | Spain          | Puerto de Vega | Porm 546                      |                |               |                          |              |
| 2                                                                            |                    | Martinez       | Carlos Guillermo | 5 5       | M. S.             | Child                       | No                                                                                   | No Spain                                                   | Spanish        | Puerto Rico    | Santurce       | Do.                           | San Juan, P.R. | June 18, 1935 | P.R.                     | San Juan     |
| 3                                                                            |                    | Bachid         | Michel           | 26 1      | M. M.             | Mfr.                        | Yes English Spanish                                                                  | Yes Syria                                                  | Syrian         | Syrha          | Monte Libano   | #58592                        | Do.            | June 13, 1935 | P.R.                     | Vega Alta    |
| Admitted at Philadelphia June 27, 1935 James A. Morris Independent Inspector |                    |                |                  |           |                   |                             |                                                                                      |                                                            |                |                |                |                               |                |               |                          |              |

|                          |          |
|--------------------------|----------|
| Total passengers . . . . | 51       |
| U. S. citizens . . . .   | 49       |
| Aliens . . . .           | <u>3</u> |

\* Permanent residence within the meaning of this paragraph shall be actual or intended domicile at the time of application.



## List one

The entries on this sheet must be typewritten or printed.

June 27

19 35

3 Allen Connerley  
Cassid B. K  
J. J. Rambo  
#45 U.S.P.H.S

92

<sup>7</sup> Name of defendant(s) as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or wishes that such overthrow be accomplished, has knowingly and willfully advocated the assassination of public officials, or whose conduct or teaching involves the unlawful destruction of property, or is a member of, affiliated with, or associated with any organization which advocates the assassination of public officials, or who is in opposition to organized government or which teaches the unlawful destruction of property, or who advocates socialism, theocracy, anarchy, anarchism, or the abolition of marriage or killing of officers or others, either specific individuals or officers generally, of the Government of the United States or of any other foreign government, domestic, foreign or their official functionary.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, J. Forsyth, Juror, of the American ss. "TAPOPA", from San Juan, Puerto Rico, do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, three in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and the most accurate.

Sworn to before me this 27<sup>th</sup> day of June, 1911  
at San Antonio

George H. Lane  
Investigation Officer

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

[illegible]

The  $\text{C}_{60}$  molecule refers to the carbon cage in its ground state.

1000

3. 'Indians' refers to the people of the West Indies rather than either Chinese or Negroes.

*Figural* Americans referred to the  $\frac{1}{2}$  Anglo-American and  $\frac{1}{2}$  Spanish descent

[illegible]

<sup>22</sup> "African Black" refers to the African people, whether indigenous to Africa or their island of the West Indies, South or North America, Europe, or Africa. Any person with admixture of blood of the African Negro should be classified under this heading.

### Discussion

The *hagfish* (*hagfish*) are a group of *hagfish* (*hagfish*) that are found in the Pacific Ocean, Atlantic Ocean, and Indian Ocean. They are known for their eel-like appearance and their ability to regenerate lost body parts. Hagfish are also known for their unique diet, which consists of scavenging on dead or dying fish. They are considered to be one of the most primitive groups of vertebrates.

PLANTING: 1997-1998

The authors are grateful to the members of the Faculty of the River Do, Inc., for permission to publish the manuscript. The authors are also grateful to the Faculty of the River Do, Inc., for permission to publish the manuscript. The authors are also grateful to the Faculty of the River Do, Inc., for permission to publish the manuscript.

[illegible]

17. *Form and content of reports of expert witnesses at trial are primarily influenced by:*

[illegible]

Yonkers, NY 10595; e-mail: [benjamin@benjaminmiller.com](mailto:benjamin@benjaminmiller.com). For a more detailed bio, please see <http://benjaminmiller.com>.

of a family, based on the fact that the number of families of type  $(i, j)$  is  $M_{ij}$ . Let  $\mathbf{L} = (L_{ij})$  be the matrix

(C)  $L_{ij} = \begin{cases} M_{ij} & \text{if } i \neq j \\ M_{ii} - 1 & \text{if } i = j \end{cases}$

and let  $\mathbf{L}^{-1} = (L_{ij}^{-1})$  be the inverse of  $\mathbf{L}$ . Then  $\mathbf{L}^{-1}$  is a matrix of type  $(i, j)$  and  $L_{ij}^{-1}$  is the probability that a family of type  $(i, j)$  is the only family of type  $(i, j)$  in the sample.

Consider the following example. Let  $f(x) = x^2 + 1$  and let  $S = \{1, 2, 3, 4, 5, 6, 7, 8, 9, 10\}$ . The number of solutions of  $f(x) = y$  for  $y \in S$  is 0 for  $y = 1, 2, 3, 4, 5, 6, 7, 8, 9, 10$ , and if  $y = 10$ , then  $f(x) = y$  has two solutions,  $x = 3$  and  $x = 4$ .

On January 24, 1964, the House Committee on Education and the Labor Committee, like all others in the House, have not yet received a reply to my request for information on the investigation of racism. However, on January 27, 1964, it was announced that the House Committee on Education and the Labor had authorized me to request for information the authority for such repudiation should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S.

"MARANA" (American)

sailing from

San Juan, Puerto Rico

June 22

, 19 35

, Arriving at Port of

Philadelphia, Pa., June 27

, 19 35

| No. on List | NAME IN FULL         |                      | AGE  | SEX | MARRIED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                 |
|-------------|----------------------|----------------------|------|-----|-------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------------------|
|             | FAMILY NAME          | GIVEN NAME           |      |     |                   |                                                                                                                                 |                                                                                                        |                                          |
| 1           | Baranor              | Clara Mary Steel     | ✓ 48 | -   | F. U.             | Hollidaysburg, Pa., March 24, 1890                                                                                              |                                                                                                        | 901 Alameda St., Baltimore, Md.          |
| 2           | Barbour              | John J.              | ✓ 47 | -   | P. S.             | Chapel Hill, N. C., July 11, 1886                                                                                               |                                                                                                        | Chapel Hill, N.C.                        |
| 3           | Barbour              | William J.           | ✓ 20 | -   | M. S.             | Harrisburg, Pa., April 6, 1915                                                                                                  |                                                                                                        | do.                                      |
| 4           | Barbour              | Richard V.           | ✓ 14 | -   | M. S.             | Monticello, Ala., April 29, 1917                                                                                                |                                                                                                        | do.                                      |
| 5           | Barbour              | Henry J.             | ✓ 14 | -   | M. S.             | Harrison, Tenn., May 24, 1921                                                                                                   |                                                                                                        | do.                                      |
| 6           | Bennett              | Foster T.            | ✓ 32 | -   | P. S.             | Warsaw, Va., August 19, 1903                                                                                                    |                                                                                                        | Warsaw, Va.                              |
| 7           | Bennett              | John T.              | ✓ 17 | -   | M. S.             | Washington, D. C., December 20, 1924                                                                                            |                                                                                                        | do.                                      |
| 8           | Bennett              | Frank S.             | ✓ 5  | -   | M. S.             | Baltimore, Md., August 30, 1929                                                                                                 |                                                                                                        | do.                                      |
| 9           | Bennett              | William S.           | ✓ 2  | -   | M. S.             | Baltimore, Md., February 6, 1933                                                                                                |                                                                                                        | do.                                      |
| 10          | Barba, Ramirez de    | Provincio            | ✓ 26 | -   | P. S.             | Isabela, P. R., April 29, 1909                                                                                                  |                                                                                                        | 601 Alameda St., New York, N.Y.          |
| 11          | De la Rosa           | Gabriel              | ✓ 24 | -   | M. S.             | Manati, P. R., August 20, 1908                                                                                                  | U.S. District Court, San Juan, P.R., Jan. 21, 1919                                                     | Hotel Chesterfield, New York, N.Y.       |
| 12          | De la Rosa, Sofia de | Teresa               | ✓ 36 | -   | P. S.             | Ponce, P. R., May 5, 1899                                                                                                       | " " " " " June 27, 1932                                                                                | do.                                      |
| 13          | De la Rosa           | Gabriel, Jr.         | ✓ 9  | -   | M. S.             | San Juan, P. R., June 27, 1926                                                                                                  |                                                                                                        | do.                                      |
| 14          | De la Rosa           | Teresa A.            | ✓ 7  | -   | P. S.             | San Juan, P. R., March 1, 1928                                                                                                  |                                                                                                        | do.                                      |
| 15          | De la Rosa           | Loyie                | ✓ 4  | -   | M. S.             | San Juan, P. R., October 19, 1930                                                                                               |                                                                                                        | do.                                      |
| 16          | Dooley               | Lisa M. V.           | ✓ 54 | -   | P. S.             | Hudson, Wis., May 30, 1881                                                                                                      |                                                                                                        | Hudson, Wis.                             |
| 17          | Dooley               | Larry                | ✓ 17 | -   | P. S.             | New Richmond, Wis., November 19, 1917                                                                                           |                                                                                                        | do.                                      |
| 18          | Donnerman            | Clara M. Augusta     | ✓ 25 | -   | P. S.             | Baltimore, Md., July 18, 1899                                                                                                   |                                                                                                        | 901 Alameda St., Baltimore, Md.          |
| 19          | Donnerman            | Harvey T.            | ✓ 20 | -   | M. S.             | Baltimore, P. S., February 7, 1927                                                                                              |                                                                                                        | Feilman Lacer, N.Y.                      |
| 20          | Donnerman            | Luis                 | ✓ 36 | -   | M. S.             | Fajardo, P. R., August 24, 1906                                                                                                 |                                                                                                        | Hotel Chesterfield, New York, N.Y.       |
| 21          | Donnerman, Mary Ann  | do. Fernan           | ✓ 32 | -   | P. S.             | San Juan, P. R., July 14, 1907                                                                                                  |                                                                                                        | do.                                      |
| 22          | William              | Leonard              | ✓ 35 | -   | M. S.             | Aachen, Germany, July 6, 1899                                                                                                   | Naturalized on father's papers, who was naturalized Butler, Pa., some time in 1913                     | 220 27th St., Pittsburgh, Pa.            |
| 23          | Groh                 | Clara Mary Knuth     | ✓ 30 | -   | P. S.             | Baltimore, Md., January 16, 1905                                                                                                |                                                                                                        | 901 Alameda St., Baltimore, Md.          |
| 24          | Kaufman              | Sister Mary James    | ✓ 27 | -   | P. S.             | Washington, D. C., November 26, 1927                                                                                            |                                                                                                        | 901 Alameda St., Baltimore, Md.          |
| 25          | Knuth                | Sister Mary Perpetua | ✓ 44 | -   | P. S.             | Rochester, N. Y., June 19, 1890                                                                                                 |                                                                                                        | do.                                      |
| 26          | Kowalski             | Sister Mary Albina   | ✓ 26 | -   | P. S.             | Rochester, N. Y., April 7, 1909                                                                                                 |                                                                                                        | do.                                      |
| 27          | Krug                 | Miss Henrietta       | ✓ 13 | -   | P. S.             | Brooklyn, N. Y., January 15, 1922                                                                                               |                                                                                                        | Lockeamp Camp, Lake Umbagog, N.Y., Vt.   |
| 28          | Krug                 | Franklin Peter       | ✓ 11 | -   | M. S.             | Monticello, P. R., January 15, 1924                                                                                             |                                                                                                        | Camp Passumpsic, Lake Umbagog, N.Y., Vt. |
| 29          | Kurtz                | Sister M. Verita     | ✓ 52 | -   | P. S.             | New York, N. Y., May 7, 1887                                                                                                    |                                                                                                        | 901 Alameda St., Baltimore, Md.          |
| 30          | Verita               | William E.           | ✓ 49 | -   | M. S.             | York, Pa., August 17, 1895                                                                                                      |                                                                                                        | 490 Jefferson St., Panama, Cal.          |

Admitted at Philadelphia June 27, 1935

Admitted at Philadelphia June 27, 1935  
George A. Marino  
Immigrant Inspector

*[Signature]*  
Inspector, S. S. "MARANA"

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

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4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. "ABRIL" American sailing from San Juan, Puerto Rico, June 22, 1935, Arriving at Port of Philadelphia, Pa. June 27, 1935

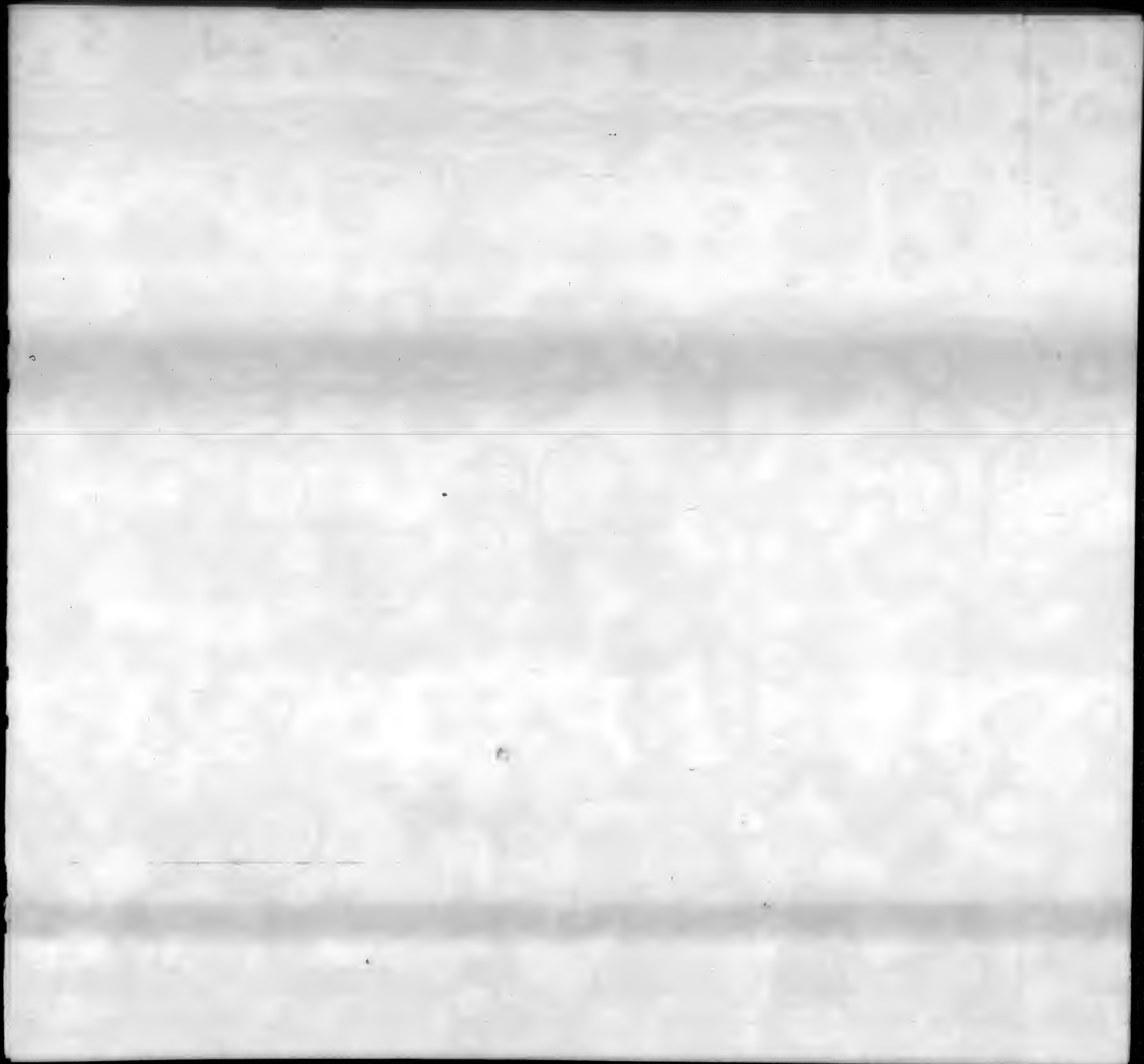
| No.<br>on<br>list | NAME IN FULL                                                                                   |                      | AGE  | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-------------------|------------------------------------------------------------------------------------------------|----------------------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                   | Family Name                                                                                    | Given Name           |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 1                 | Artigas                                                                                        | Maria F. Ledesma     | ✓ 35 | -   | F. M.                | Barrois, D. R., January 3, 1900                                                                                                          |                                                                                                              | Hotel Ansonia, New York, N.Y.           |
| 2                 | Miller                                                                                         | Sister M. Dolores    | ✓ 31 | -   | F. S.                | Pittsburgh, Pa., August 30, 1903                                                                                                         |                                                                                                              | St. Francis Convent, Millvale, Pa.      |
| 3                 | Morringle                                                                                      | Vitein               | ✓ 47 | -   | F. W.                | Ponce, P. R., July 19, 1888                                                                                                              |                                                                                                              | Hotel Lord Baltimore, Baltimore, Md.    |
| 4                 | Palacios                                                                                       | Beter                | ✓ 57 | -   | F. S.                | Pavey, Nicaragua, August 25, 1877                                                                                                        | U.S. District Court, San Juan, Dec. 13, 1920                                                                 | 152 Madison Ave., New York, N.Y.        |
| 5                 | Preston                                                                                        | Florence             | ✓ 33 | -   | F. W.                | Springfield, Minn., August 24, 1902                                                                                                      |                                                                                                              | Springfield, Minn.                      |
| 6                 | Preston                                                                                        | Florence Spain       | ✓ 4  | -   | F. S.                | Springfield, Minn., March 27, 1931                                                                                                       |                                                                                                              | Springfield, Minn.                      |
| 7                 | Ramirez                                                                                        | Rosa                 | ✓ 25 | -   | F. S.                | Isabela, P. R., December 17, 1910                                                                                                        |                                                                                                              | 601 W. 180th St., New York, N.Y.        |
| 8                 | Saylor                                                                                         | Rev. Frank A.        | ✓ 57 | -   | M. W.                | Crown Point, Ind., January 22, 1878                                                                                                      |                                                                                                              | 281 4th Ave., New York, N.Y.            |
| 9                 | Saylor                                                                                         | Annie F.             | ✓ 55 | -   | F. W.                | Battled, Fla., February 28, 1880                                                                                                         |                                                                                                              | do.                                     |
| 10                | Simko                                                                                          | Sister Mary Olivia   | ✓ 70 | -   | F. S.                | Bridgport, Conn., September 27, 1904                                                                                                     |                                                                                                              | 901 Alsquith St., Baltimore, Md.        |
| 11                | Staker                                                                                         | Sister M. Chrysostom | ✓ 38 | -   | F. S.                | Lonaconing, Md., July 25, 1897                                                                                                           |                                                                                                              | do.                                     |
| 12                | Such                                                                                           | Emilia F.            | ✓ 46 | -   | F. M.                | Ponce, P. R., June 20, 1889                                                                                                              |                                                                                                              | Hotel Lord Baltimore, Baltimore, Md.    |
| 13                | Such                                                                                           | Marina               | ✓ 20 | -   | F. S.                | Santurce, P. R., July 18, 1915                                                                                                           |                                                                                                              | do.                                     |
| 14                | Truss                                                                                          | Walter J.            | ✓ 45 | -   | M. M.                | Brooklyn, N. Y., August 17, 1889                                                                                                         |                                                                                                              | 39 Whitehall St., New York, N.Y.        |
| 15                | Turper                                                                                         | Frank William        | ✓ 34 | -   | M. M.                | Summerville, Mass., May 21, 1901                                                                                                         |                                                                                                              | Township Line Rd., Port Washington, Pa. |
| 16                | Wagner                                                                                         | Sister M. Emmelinda  | ✓ 34 | -   | F. S.                | Pittsburgh, Pa., December 19, 1900                                                                                                       |                                                                                                              | St. Francis Convent, Millvale, Pa.      |
| 17                | Weaver                                                                                         | Lodemia              | ✓ 27 | -   | F. S.                | Delaware, O., April 23, 1908                                                                                                             |                                                                                                              | 317 Bernhart St., Marion, O.            |
| 18                | Wooten                                                                                         | Katherine C.         | ✓ 50 | -   | F. M.                | Paris, Ky., November 19, 1885                                                                                                            |                                                                                                              | 2540 Mass. Ave., Washington, D.C.       |
| 19                | <p>Admitted at Philadelphia<br/>June 27, 1935<br/>George A. Marine<br/>Immigrant Inspector</p> |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 20                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 21                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 22                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 23                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 24                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 25                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 26                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 27                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 28                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 29                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |
| 30                |                                                                                                |                      |      |     |                      |                                                                                                                                          |                                                                                                              |                                         |

*[Signature]*  
Turper, SS. "ABRIL"

Line Baltimore Insular  
Owners A. H. Bull & Co., Inc.  
Local Agents A. H. Bull & Co., Inc.

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number **1**

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. **"TIVIVES"** sailing from **PTO. BARRIOS, GUATEMALA**, **JUNE 23rd, 1935**, Arriving at Port of **PHILADELPHIA, PA.** - **JUNE 30th, 1935**.

| No.<br>on<br>List                                                 | NAME IN FULL |            | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED GIVE NAME AND DATE OF ARRIVAL<br>WHEN ISSUED AND BIRTHDAY PAPERS<br>AND DATE OF ENTRY | ADDRESS IN UNITED STATES                |
|-------------------------------------------------------------------|--------------|------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                                                                   | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| <b>PASSENGER EMBARKED AT PHILADELPHIA, PA. - JUNE 17th, 1935.</b> |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 1                                                                 | Albrecht     | Marie E.   | 30  | F   | S                    | September 7th, 1904. Philadelphia, Pa.                                                                                                  | Born Phila.                                                                                          | 2313 E. Fletcher St., Philadelphia, Pa. |
| 2                                                                 |              |            |     |     |                      | <i>17.500000 admitted</i>                                                                                                               |                                                                                                      |                                         |
| 3                                                                 |              |            |     |     |                      | <i>Louis P. Nolan</i>                                                                                                                   |                                                                                                      |                                         |
| 4                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 5                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 6                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 7                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 8                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 9                                                                 |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 10                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 11                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 12                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 13                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 14                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 15                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 16                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 17                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 18                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 19                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 20                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 21                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 22                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 23                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 24                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 25                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 26                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 27                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 28                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 29                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |
| 30                                                                |              |            |     |     |                      |                                                                                                                                         |                                                                                                      |                                         |

- 45 -

Line **United Fruit Co.,**  
Owners **United Fruit Steamship Corp.,**  
Local Agents **United Fruit Co.,**

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# AFFIDAVIT OF SURGEON

I, **ROBERT L. WILSON**, Surgeon of the **AMERICAN S.S. "TIVIVES"**, SAILING THEREWITH, do solemnly, sincerely, and truly **SWEAR** that I have had **THIRTY-SIX** years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of **THE STATE OF CALIFORNIA**, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, **ONE** in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

*Robert L. Wilson*

Sworn to before me this **30** day of **June**, 19**19**  
at **Palmdale**

*Louis P. Nolan*

NOTE: If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration inspector at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Ruman.                                        |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Serbian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Serian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List **A1.**

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.  
This pink sheet is for the listing of

3588

*And S. S. "TIVIVES"*

Passengers sailing from PUEBLO BARRIOS, GUATEMALA

JUNE 23rd,

1935.

| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL<br>Family name Given name | Age<br>Yrs. Mos. | Sex<br>M F | Calling or occupation<br>Housewife Sales Manager | Able to<br>Read Write | Nationality, Country of which citizen or subject | Race or people | Place of birth<br>Country City or town, State, Province or District | Immigration Visa, Passport Visa, or Reentry Permit number<br>Date of issue at port of arrival | Issued<br>Place Date | Data concerning verifications of landings, etc. | *Last permanent residence<br>Country City or town, State, Province or District |
|-------------|-----------------------------------------------------------------------|----------------------------------------|------------------|------------|--------------------------------------------------|-----------------------|--------------------------------------------------|----------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------|--------------------------------------------------------------------------------|
| 1           |                                                                       | URRUTIA                                | 31               | F          | Housewife                                        | Yes                   | Spanish                                          | Yes            | Guatemala                                                           | Spanish American                                                                              | Guatemala            | Guatemala                                       | Guatemala                                                                      |
| 2           |                                                                       | WILLIAMS                               | 50               | M          | Manager                                          | Yes                   | English                                          | Yes            | England                                                             | English                                                                                       | England              | Rockferry                                       | England                                                                        |
| 3           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 4           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 5           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 6           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 7           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 8           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 9           |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 10          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 11          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 12          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 13          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 14          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 15          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 16          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 17          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 18          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 19          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 20          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 21          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 22          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 23          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 24          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 25          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 26          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 27          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 28          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 29          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |
| 30          |                                                                       |                                        |                  |            |                                                  |                       |                                                  |                |                                                                     |                                                                                               |                      |                                                 |                                                                                |

*United Fruit Co.  
P.O. Box 1200*

*2 persons admitted in transit  
J. W. P. [unclear]  
U. S. IMMIGRANT INSPECTOR*

*Head of [unclear] 7/28/35  
J. W. P. [unclear]  
7/28/35*

Total passengers . . . . . 2  
U. S. citizens . . . . . -  
Aliens . . . . . 2

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of names will be found on the back of this sheet.



## List A1

The entries on this sheet must be typewritten or printed.

4-011

2 alien <sup>Examined</sup>  
Cared 811.  
C. H. Kambor  
H. H. S. U. S. P. H. S.

Line United Fruit Co.,  
Owners United Fruit Steamship Corp.,  
Local Agents United Fruit Co.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, FRANK 'ANGUIS - MASTER, of the AMERICAN S.S. "TIVIVES", from PTO. BARRIOS, GUATEMALA, do solemnly, sincerely, and truly SWEAR that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, ONE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 30 day of June, 1935  
at Maia

**000000**

*James P. Nolan*  
Immigrant Inspector.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each part at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1923; and also recording on separate manifests those alien traveling in the third class, and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (*Age*). The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 6 (*Married or single*). The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (*calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each after arrival, as, for example, civil engineer, stationary engineer, locomotive engineer, miner, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown on a return.

A farmer is one who operates a farm, either for himself or for others.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors during the personal examination of alien arrivals.

Case 1. *Subject able to read and write.* This column is subdivided and contains the following questions: "Read and hear many jobs, if a person is poor, one who cannot read and write is at a disadvantage in the job market. What should be done to improve the situation?" "If a person is unable to read and write, what should be done to improve the situation?" "If a person is unable to read and write, what should be done to improve the situation?" "If a person is unable to read and write, what should be done to improve the situation?"

Column 9 (*Nationality*)—Question 9 should be construed to mean: the country of which actor is a citizen or subject.

Column 10 *Office or people*—See list of names printed on back of V-16 sheet. The entry should show the name of people as given in mail list.

Spaced attention should be paid to the distinction between race and the country of which either or subject, country, has been predominant, and country of birth, and nationality should be carefully retained by impressing the language, the names, the language under the head of country does not mean. For instance, "France," "Switzerland," "France," appearing under the head of race or people does not mean "Swiss," "Swiss," "French," appearing under the head of race or people does not mean "Swiss," "Swiss," "French," by country. An Irish, German, or Polish race, race must properly come under the heading of England, Switzerland, or any other country. In this corner the following distinctions should be as carefully observed:

## 4133

The term "Cuban" refers to the Cuban people (not Negroes)

31.  $\frac{1}{2} \leq \frac{1}{x} \leq \frac{3}{2}$ 

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

[illegible]

<sup>3</sup> "Spanish American" refers to the people of Central and South America of Spanish descent.

AUGUST 1986      *Coultas et al.*

\* "African" (black) refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

## TULLIAN, C. 1983.

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)". Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi, and Molise; Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*). The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*) - Prefix serial number of document with abbreviation "QIV," "QIV," "PV," or "IP," as appropriate, to indicate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passenger Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as in Section 1 (a).

Column 13—This question has reference to the place and date of issue of the opinion described in column 12, and is self-explanatory.

Column 11 (1 *compartiment de livraison*, 10 *l.*) = Steamship Boxes, 10 *l.* each, for use in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*). Actual or intended permanent residence of person shall constitute permanent residence. The last country in which a person resided with the intention of remaining one year or more shall be his last permanent residence, regardless of length of actual residence therein. The entire life of a person may be spent in the country, city or town, state, province, or district of the last permanent residence. It is important for statistical purposes that the status be considered a permanent one, even if last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents in the United States and are returning from a visit abroad should be recorded as United States.

Column 17 (*Name and complete address of nearest relative or friend*). — If the relative or friend is an alien enemy, the entire should give name, exact relationship and complete address of such relative. If no such relative living, give name and address of nearest living relative or friend living in country whence alien enemy give name and address of relative or friend in country of which citizens or subject. If such country is unknown, give name and address of nearest living relative or friend in that whence alien enemy. Address should include street and number.

Column 18 (*Final destination*). The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States; and port of intended departure.

Column 19 (Whether having a ticket to such first destination) The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*) - The entry should show distinctly, by whom passage was paid, as self; husband, father, brother, or other relative; friend;

(Column 21) Whether in possession of \$50, and if less, how much. The answer should give in each case (individual or family) the exact amount of money or money brought by the head of a family should not be credited against the money brought by the family.

Column 22 (If *last case before in the United States*, and if so, *where, when, and date of last departure*) The entries should show whether and (Y or N) or No in the United States before; and if so, the year (or period of time) and place, if in the Philadelphia. Where in the United States more than once previously, indicate last one.

whether going to *your relative or friend*, with a more specific meaning: here a brother/sister going to visit either a relative or friend, with a more, and complete, meaning, and if a relative, the exact relationship.

Columns 24 to 26. These questions are self-explanatory and the responses of the notaries on the street are subject to review by a report on oath by the notary himself alone. However, in answering question 30, if a notary has been excluded or disbarred within one year, and in answering 31, if a notary has been expelled or suspended in the past at any time, authority in the Secretary of Labor is hereby to find and announce such to the show.



UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

MICROPHOTOGRAPHIC CERTIFICATION

I hereby certify that I am the legal custodian of the original record of the manifests of arriving aliens and United States citizens and of crew lists of arriving vessels duly delivered to the immigration authorities at the ~~PHILADELPHIA, PA.~~ District Office, contained in the volumes enumerated below for vessels arriving in the ~~PHILADELPHIA, PA.~~ immigration district on the date indicated: ~~PHILADELPHIA, PA.~~

-276- 111011-3-1935-  
-TO JUNE 30-1935-

that microphotographic copies of the above described original records appear on this roll of film; that in conformity with instructions received by me from the Commissioner of Immigration and Naturalization I caused originals to be microphotographed under my supervision and compared with the original documents; that the images appearing on this roll of microfilm are true and complete photographic copies of the above described original records; and that said original records have been microphotographed to serve as permanent records in accordance with all the requirements of Public 115, 78 Congress, First Session, approved July 7, 1943, and of the regulations promulgated by the National Archives Council and approved by the President of the United States in accordance with the provisions of Section 2 of said Act.

Executed in the County of Philadelphia, Commonwealth of Pennsylvania, this.....day of.....194...

OCT 26 1945

.....  
CHIEF,  
Information, Mail and Files Section  
Central Office  
Immigration and Naturalization Service

CERTIFICATE OF CAMERA OPERATOR

I hereby certify that the microphotographic images appearing on this roll of film are true and complete microphotographic copies of original records of the Immigration and Naturalization Service described above. I operated the camera at the time these records were microphotographed.

.....  
Date

.....  
Camera Operator



UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

MICROPHOTOGRAPHIC CERTIFICATION

I hereby certify that I am the legal custodian of the original record of the manifests of arriving aliens and United States citizens and of crew lists of arriving vessels duly delivered to the immigration authorities at the ~~PHILADELPHIA, PA.~~ District Office, contained in the volumes enumerated below for vessels arriving in the ..... Immigration district on the date indicated:

PHILADELPHIA, PA.

277- July-1-1935  
To Sep 30-35

that microphotographic copies of the above described original records appear on this roll of film; that in conformity with instructions received by me from the Commissioner of Immigration and Naturalization I caused originals to be microphotographed under my supervision and compared with the original documents; that the images appearing on this roll of microfilm are true and complete photographic copies of the above described original records; and that said original records have been microphotographed to serve as permanent records in accordance with all the requirements of Public 115, 78 Congress, First Session, approved July 7, 1943, and of the regulations promulgated by the National Archives Council and approved by the President of the United States in accordance with the provisions of Section 2 of said Act.

Executed in the County of Philadelphia, Commonwealth of Pennsylvania, this.....day of.....1945

OCT 26 1945

CHIEF,

Information, Mail and Files Section  
Central Office  
Immigration and Naturalization Service

CERTIFICATE OF CAMERA OPERATOR

I hereby certify that the microphotographic images appearing on this roll of film are true and complete microphotographic copies of original records of the Immigration and Naturalization Service described above. I operated the camera at the time these records were microphotographed.

OCT 26 1945

Date

Camera Operator



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_ years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

\_\_\_\_\_  
Signature and title of immigration or other officer authorized to administer oaths

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before a magistrate, Clerk of Court, Justice of the Peace, or other officer authorized to administer oaths, at the port of arrival, and one of them shall be retained on board the vessel, and the other shall be retained at the port of departure, to be produced to the immigration or other officer authorized to administer oaths, at the port of departure, if the surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusynian).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List BOOK #217

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (yellow) sheet is for the listing of

S. S.

Passengers sailing from

191

| No. on List. | HEAD-TAX STATUS.<br>(This column for use of Government officials only.) | NAME IN FULL.  |             | Age.      | Sex.          | Married or single. | Calling or occupation. | Able to— |                                                                | Nationality.<br>(Country of which citizen or subject.) | † Race or people. | * Last permanent residence. |               | Final destination.<br>(Interviewed (future permanent) residence.)                                                     |      |         |  |
|--------------|-------------------------------------------------------------------------|----------------|-------------|-----------|---------------|--------------------|------------------------|----------|----------------------------------------------------------------|--------------------------------------------------------|-------------------|-----------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------|------|---------|--|
|              |                                                                         | Family name.   | Given name. | Yrs. Mos. |               |                    |                        | Read.    | Read what language (or, if exemption claimed, on what ground). | Write.                                                 |                   | Country.                    | City or town. | The name and complete address of nearest relative or friend in country whence alien came.<br><br>State. City or town. |      |         |  |
| 1            |                                                                         | STEAMSHIP      |             |           | MONTH AND DAY | YEAR               | PAGE                   |          |                                                                |                                                        | STEAMSHIP         |                             |               | MONTH AND DAY                                                                                                         | YEAR | PAGE    |  |
| 2            |                                                                         | GRANADA        |             | JULY 1    |               | 1935               | 1                      |          |                                                                |                                                        |                   | TIVIVES                     | AUGUST 25     |                                                                                                                       | 1935 | 57-59   |  |
| 3            |                                                                         | GULFWING       |             | " 3       |               | "                  | 2-3                    |          |                                                                |                                                        |                   | TUGELA                      | " 26          |                                                                                                                       | "    | 60      |  |
| 4            |                                                                         | SAGUA          |             | " 4       |               | "                  | 4                      |          |                                                                |                                                        |                   | ROSARIO                     | " 26          |                                                                                                                       | "    | 61-62   |  |
| 5            |                                                                         | TURRIALBA      |             | " 7       |               | "                  | 5                      |          |                                                                |                                                        |                   | GRANADA                     | " 26          |                                                                                                                       | "    | 63-66   |  |
| 6            |                                                                         | GATUN          |             | " 7       |               | "                  | 6                      |          |                                                                |                                                        |                   | GULFHAWK                    | " 26          |                                                                                                                       | "    | 67      |  |
| 7            |                                                                         | COMAYAGUA      |             | " 11      |               | "                  | 7                      |          |                                                                |                                                        |                   | GULFBIRD                    | " 31          |                                                                                                                       | "    | 68      |  |
| 8            |                                                                         | SVANEHOLM      |             | " 11      |               | "                  | 8                      |          |                                                                |                                                        |                   | FANNY HOEGH                 | " 31          |                                                                                                                       | "    | 69      |  |
| 9            |                                                                         | TIVIVES        |             | " 14      |               | "                  | 9-10                   |          |                                                                |                                                        |                   | CARRILLO                    | SEPT. 1       |                                                                                                                       | "    | 70-71   |  |
| 10           |                                                                         | GRANADA        |             | " 16      |               | "                  | 11                     |          |                                                                |                                                        |                   | SUTREHOLM                   | " 2           |                                                                                                                       | "    | 72      |  |
| 11           |                                                                         | BARBARA        |             | " 16      |               | "                  | 12-14                  |          |                                                                |                                                        |                   | SAGUA                       | " 3           |                                                                                                                       | "    | 73      |  |
| 12           |                                                                         | TOPEKA         |             | " 19      |               | "                  | 15                     |          |                                                                |                                                        |                   | CADMUS                      | " 5           |                                                                                                                       | "    | 74      |  |
| 13           |                                                                         | MONTREAL CITY  |             | " 21      |               | "                  | 16                     |          |                                                                |                                                        |                   | WINNETOU                    | " 5           |                                                                                                                       | "    | 75      |  |
| 14           |                                                                         | CARRILLO       |             | " 21      |               | "                  | 17                     |          |                                                                |                                                        |                   | ATENAS                      | " 8           |                                                                                                                       | "    | 76-77   |  |
| 15           |                                                                         | GATUN          |             | " 22      |               | "                  | 18-20                  |          |                                                                |                                                        |                   | GRANADA                     | " 9           |                                                                                                                       | "    | 78-79   |  |
| 16           |                                                                         | GULFHAWK       |             | " 23      |               | "                  | 21                     |          |                                                                |                                                        |                   | CEIBA                       | " 11          |                                                                                                                       | "    | 80      |  |
| 17           |                                                                         | COMAYAGUA      |             | " 25      |               | "                  | 22                     |          |                                                                |                                                        |                   | BARBARA                     | " 11          |                                                                                                                       | "    | 81-85   |  |
| 18           |                                                                         | FRANKFURT      |             | " 26      |               | "                  | 23                     |          |                                                                |                                                        |                   | GULFHAWK                    | " 12          |                                                                                                                       | "    | 86      |  |
| 19           |                                                                         | MAX ALBRECHT   |             | " 27      |               | "                  | 24                     |          |                                                                |                                                        |                   | TURRIALBA                   | " 15          |                                                                                                                       | "    | 87-88   |  |
| 20           |                                                                         | TIVIVES        |             | " 28      |               | "                  | 25-26                  |          |                                                                |                                                        |                   | SVANEHOLM                   | " 16          |                                                                                                                       | "    | 89      |  |
| 21           |                                                                         | GRANADA        |             | " 29      |               | "                  | 27-28                  |          |                                                                |                                                        |                   | TANAMO                      | " 16          |                                                                                                                       | "    | 90      |  |
| 22           |                                                                         | EAGLE          |             | " 31      |               | "                  | 29                     |          |                                                                |                                                        |                   | GULFPOINT                   | " 18          |                                                                                                                       | "    | 91      |  |
| 23           |                                                                         | GULFPENN       |             | " 31      |               | "                  | 30                     |          |                                                                |                                                        |                   | TORONTO                     | " 20          |                                                                                                                       | "    | 92      |  |
| 24           |                                                                         | LIMON          |             | AUGUST 2  |               | "                  | 31                     |          |                                                                |                                                        |                   | GUPSUM-EMPRESS              | " 21          |                                                                                                                       | "    | 93-94   |  |
| 25           |                                                                         | WINNETOU       |             | " 2       |               | "                  | 32                     |          |                                                                |                                                        |                   | THODE FAGERLUND             | " 21          |                                                                                                                       | "    | 95      |  |
| 26           |                                                                         | CARRILLO       |             | " 4       |               | "                  | 33-35                  |          |                                                                |                                                        |                   | ATENAS                      | " 22          |                                                                                                                       | "    | 96-97   |  |
| 27           |                                                                         | ATENAS         |             | " 6       |               | "                  | 36                     |          |                                                                |                                                        |                   | GRANADA                     | " 23          |                                                                                                                       | "    | 98-99   |  |
| 28           |                                                                         | GULFHAWK       |             | " 8       |               | "                  | 37                     |          |                                                                |                                                        |                   | GULFHAWK                    | " 28          |                                                                                                                       | "    | 100     |  |
| 29           |                                                                         | OLANCHO        |             | " 8       |               | "                  | 38                     |          |                                                                |                                                        |                   | TELA                        | " 29          |                                                                                                                       | "    | 101-102 |  |
| 30           |                                                                         | GOV. JOHN LIND |             | " 9       |               | "                  | 39-40                  |          |                                                                |                                                        |                   | CEIBA                       | " 30          |                                                                                                                       | "    | 103-104 |  |
| 31           |                                                                         | TIVIVES        |             | " 11      |               | "                  | 41-42                  |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 32           |                                                                         | GRANADA        |             | " 12      |               | "                  | 43-44                  |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 33           |                                                                         | NEW YORK CITY  |             | " 15      |               | "                  | 45                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 34           |                                                                         | GULFBIRD       |             | " 15      |               | "                  | 46                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 35           |                                                                         | GULFPENN       |             | " 16      |               | "                  | 47                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 36           |                                                                         | TOLEDO         |             | " 16      |               | "                  | 48                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 37           |                                                                         | CARRILLO       |             | " 18      |               | "                  | 49-50                  |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 38           |                                                                         | BARBARA        |             | " 21      |               | "                  | 51                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 39           |                                                                         | ROTTERDAM      |             | " 21      |               | "                  | 52                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 40           |                                                                         | BARBARA        |             | " 22      |               | "                  | 53-54                  |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 41           |                                                                         | ATENAS         |             | " 21      |               | "                  | 55                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |
| 42           |                                                                         | COLD HARBOR    |             | " 22      |               | "                  | 56                     |          |                                                                |                                                        |                   |                             |               |                                                                                                                       |      |         |  |

Total passengers

U. S. citizens

Aliens

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



The entries on this sheet must be typewritten or printed.

### Arriving at Port of

191

Note.—Full text of question 24 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States of all forms of law or who believes in or is supposed to organize government, or who advocates the assassination of public officials, or who advocates to teach the unlawful destruction of property, or a member of a affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or who teaches the unlawful destruction of property, or who advocates to commit the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do solemnly, sincerely, and truly \_\_\_\_\_ that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

\_\_\_\_\_, Officer.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

Immigration Officer.

14-420

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (Head tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply an engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language (or, if exemption is claimed, upon what ground)?" In answering this question the answer or subject the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject; country of last permanent residence, and country of birth, and manifests should be carefully read by inspectors and registry clerks in this regard. For instance, "French" appearing under the heading of country does not mean "French" by race or people, and, similarly, "French" appearing under the heading of race or people does not mean "French" by country. An Irish, German, or Hebrew alien by mistake might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN.

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN.

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN.

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK).

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH).

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Veneto, and Friuli) and their descendants, whether residing in Italy, Switzerland, Austria-Hungary, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH).

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, the Aust., the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 11 should show the country and city or town of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 12 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name and address of such relative. If no such relative living, give name and address of friend.

Column 13 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; or country, if outside the United States.

Column 14 (Whether bringing a ticket to such final destination).—The answer should be either Yes or No, as in the list.

Column 15 (By whom was passage paid).—The entry should show at least by whom passage was paid, as self, husband, father, brother, or other relative, friend, steamship company, etc.

Column 17 (If better in possession of \$100 and if less than \$100).—The answer should give to each individual or family. The exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 18 (Whether ever before in the United States, and if so, when and where).—The answer should show whether or not (Yes or No) in the United States before, and if so, the year or period of years, as, for example, 1894-1897, Philadelphia.

Column 19 (Whether going to join relative or friend, and if so, what relative or friend, with name and complete address).—The answer should show whether going to join either a relative or friend, and if so, what relative or friend, with name and complete address.

Column 20 to 23.—These questions are self-explanatory and the answers, like all others of the same kind, are subject to revision by inspectors and officers in the examination of aliens. However, in answer to question 23, if alien has been deported within one year and the Secretary of Labor has authorized a visa to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. *Grand*

Sailing from *Alvaro Obregon Mexico*

, June 25th, 1935, Arriving at Port of *Philadelphia Pa.*

July 1st, 1935

| No. on List | NAME IN FULL<br>Family Name Given Name | AGE<br>Yrs. Mos. | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS. | ADDRESS IN UNITED STATES                   |
|-------------|----------------------------------------|------------------|-----|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--------------------------------------------|
| 1           | Mc Neil                                | Donald S.        | 27  | M                                                                                                                                  | S Oct 14th 1908 New York                                                                                | 156 Bidart St Syracuse N.Y.                |
| 2           | Johnston                               | Adele S.         | 45  | F                                                                                                                                  | S Aug 28th 1890 Verona New Jersey                                                                       | 4930 N. Merwin <i>Phila. Pa.</i>           |
| 3           | BOEHM                                  | Razel            | 37  | F                                                                                                                                  | W April 19th 1898 Sumnerfield Ohio                                                                      | 77 N. Wheatland Ave. Columbus. <i>Ohio</i> |
| 4           | BOVICHOU                               | John Ernest      | 59  | M                                                                                                                                  | M April 12th 1876 Philada Pa.                                                                           | 6261 Columbia Exp. Phila. Pa.              |
| 5           | BOVICHOU                               | Ruth R           | 50  | F                                                                                                                                  | M Dec 6th 1884 " "                                                                                      | " " " " "                                  |
| 6           | Shores                                 | Jacob J          | 35  | M                                                                                                                                  | M Aug. 5th 1899 Cleveland Ohio                                                                          | Plaza <i>Ch. B.</i> Camden New Jersey      |
| 7           | MACKEY                                 | Catherine        | 35  | F                                                                                                                                  | S Dec 30th 1899 Brooklyn NY.                                                                            | Islip LI. N.Y.                             |
| 8           | MACLAY                                 | Mildred          | 29  | F                                                                                                                                  | S Sept 26th 1905 " "                                                                                    | 127 Delank Ave Brooklyn NY.                |
| 9           | Dietze                                 | Herbert          | 37  | M                                                                                                                                  | S June 3rd 1898 New York                                                                                | 5 Prospect Place <i>N.Y. City</i>          |
| 10          | Forbes                                 | Catharine        | 36  | F                                                                                                                                  | S Nov. 12th 1898 New York                                                                               | 4 West 34 St NY.                           |
| 11          | Machen                                 | Henry B.         | 59  | M                                                                                                                                  | M Nov. 5th 1876 NYC.                                                                                    | 210 Riverside Drive NY.                    |

*11 N.Y. citizens admitted  
Louis P. Molay*

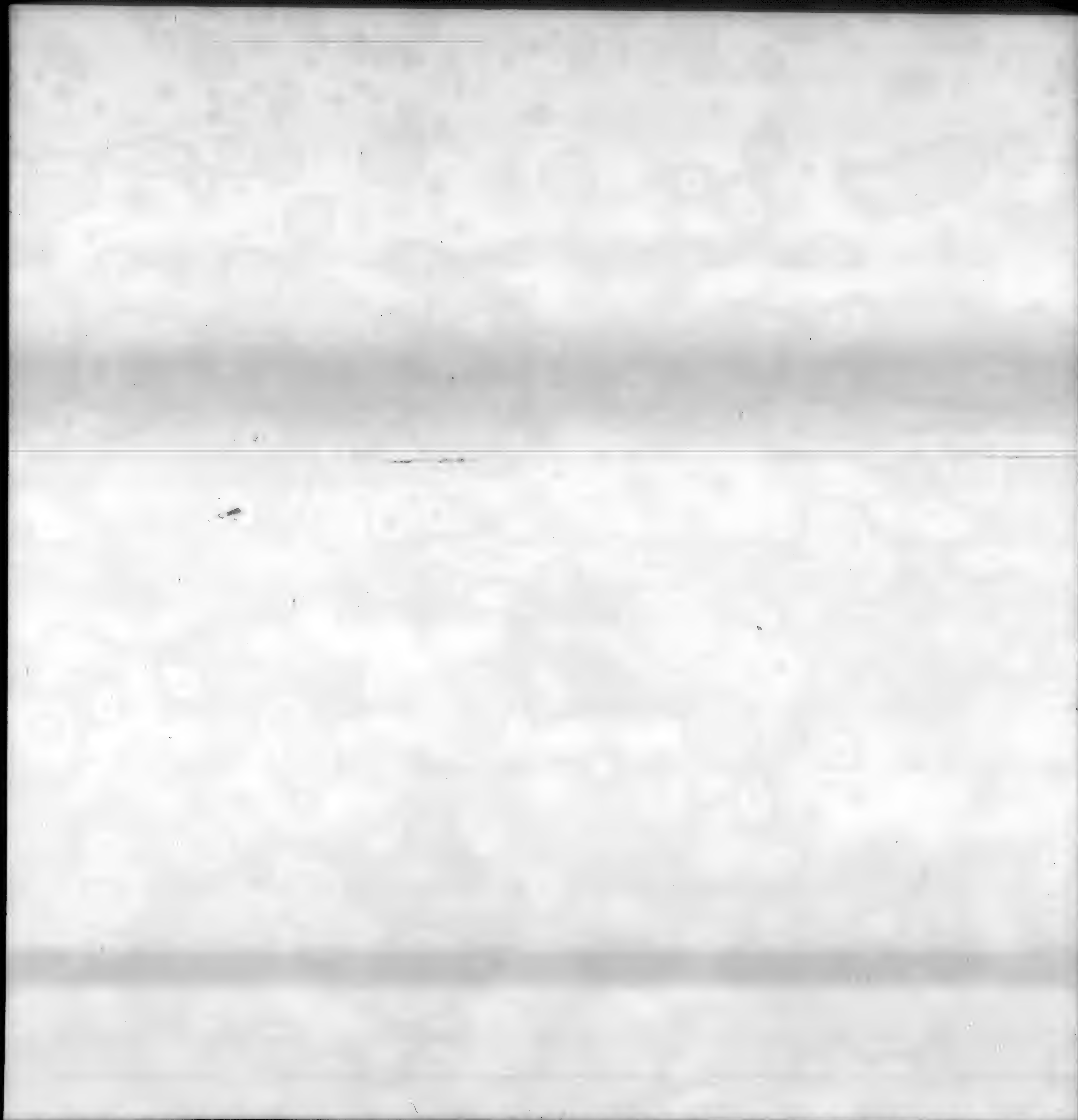
The above Passengers are free from any contagious disease

Ships Surgeon

Master

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Dr. Gustavo Otero, Surgeon of the SS. La Pichas, San, do  
solemnly, sincerely, and truly declare that I have had 5 years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of

, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this 26th day of June, 1935,  
at

Manuel J. Pichas  
(Seal and Signature of Notary Public)

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before a Commissioner of Immigration at port of arrival, and any changes that may become necessary in the course of the voyage shall be noted on the manifest before the affidavit is executed.  
If the surgeon sails with the vessel, this affidavit of verification shall be executed at the port of departure before some other authorized Commissioner of Immigration.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russians).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

3500

~~Spoo~~ Motorship "GULFWING"

*Passengers sailing from* Las Piedras, Venezuela

June 26, 1935 . 19

|                            |   |
|----------------------------|---|
| Total passengers . . . . . | 5 |
| U. S. citizens . . . . .   | 4 |
| Aliens . . . . .           | 1 |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† Last of race will be found on the back of this sheet.



## List No. 1 .....

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA, PENNSYLVANIA

JULY 3, 1935

19

*Note.*— Full text of question 28 is as follows: "Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character."



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, P. V. Querry, Chief Officer of the Am. S.S. Buffalo, from Las Piedras Ven., do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

P. V. Querry  
Chief Officer.

Sworn to before me this 3rd day of July, 1935  
at Philadelphia

Henry A. Harne  
Immigration Officer.

12-20

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical A-Visa, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head-tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and correctless should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language last, if exemption is claimed, upon what ground." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Liguria, Toscana, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Toscana, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)." Most of these people speak a Gallic dialect of the Italian language.

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NIV," "FV," or "RP," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reentry Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Verifications of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$20, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The entries should show whether or not Yes or No in the United States before; and if so, the year (or period of years) and place, as, 1904, 1907, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 36.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Am*

*South of Gulf of Mexico*

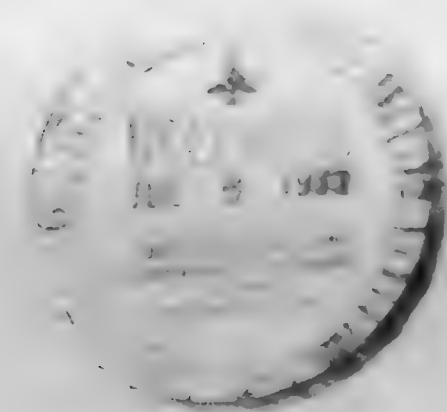
sailing from *IAS PIEDRAS, VENEZUELA* *JUNE 26, 1935*, 19, Arriving at Port of *Philadelphia, Penna.* *July 3, 1935*

| No.<br>Line | NAME IN FULL                    |                   | AGE         | SEX                | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                   |
|-------------|---------------------------------|-------------------|-------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------|
|             | Family Name                     | Given Name        | Yrs. Mon.   | MAILED OR RECORDED |                                                                                                                                    |                                                                                                        |                                            |
| 1           | <i>Harrington</i>               | <i>G.D. Mrs.</i>  | <i>40 1</i> | <i>F</i>           | <i>Boston, Mass. Feb. 1, 1895</i>                                                                                                  | <i>Am. passport # 177847</i>                                                                           | <i>290 Commonwealth Ave. Boston, Mass.</i> |
| 2           | <i>Hulett</i>                   | <i>Ruth Miss.</i> | <i>27 2</i> | <i>F</i>           | <i>Salem, Mass. April 17, 1908</i>                                                                                                 | <i>issued at Wash. D.C. 4/12/35</i>                                                                    | <i>1 Nursery Street, Salem, Mass.</i>      |
| 3           | <i>Turrentine</i>               | <i>A.R.</i>       | <i>25 3</i> | <i>M</i>           | <i>Charleston, Mississippi Jan. 27, 1910</i>                                                                                       | <i>Am. passport # 112455</i>                                                                           | <i>1309 Bomar Ave. Houston, Texas</i>      |
| 4           | <i>Price</i>                    | <i>W.C.</i>       | <i>41 2</i> | <i>M</i>           | <i>Philadelphia, Penna. May 4, 1898</i>                                                                                            | <i>Am. passport # 68358</i>                                                                            | <i>1212 5th Ave. New York City, N.Y.</i>   |
| 5           | <i>Admitted at Philadelphia</i> |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 6           | <i>July 3, 1935</i>             |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 7           | <i>Inspector of Marine</i>      |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 8           | <i>Immigrant Inspector</i>      |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 9           |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 10          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 11          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 12          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 13          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 14          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 15          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 16          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 17          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 18          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 19          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 20          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 21          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 22          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 23          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 24          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 25          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 26          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 27          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 28          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 29          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |
| 30          |                                 |                   |             |                    |                                                                                                                                    |                                                                                                        |                                            |

*W. Lee & Co.*  
*Chief Mate*

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Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S.

" Sagua "

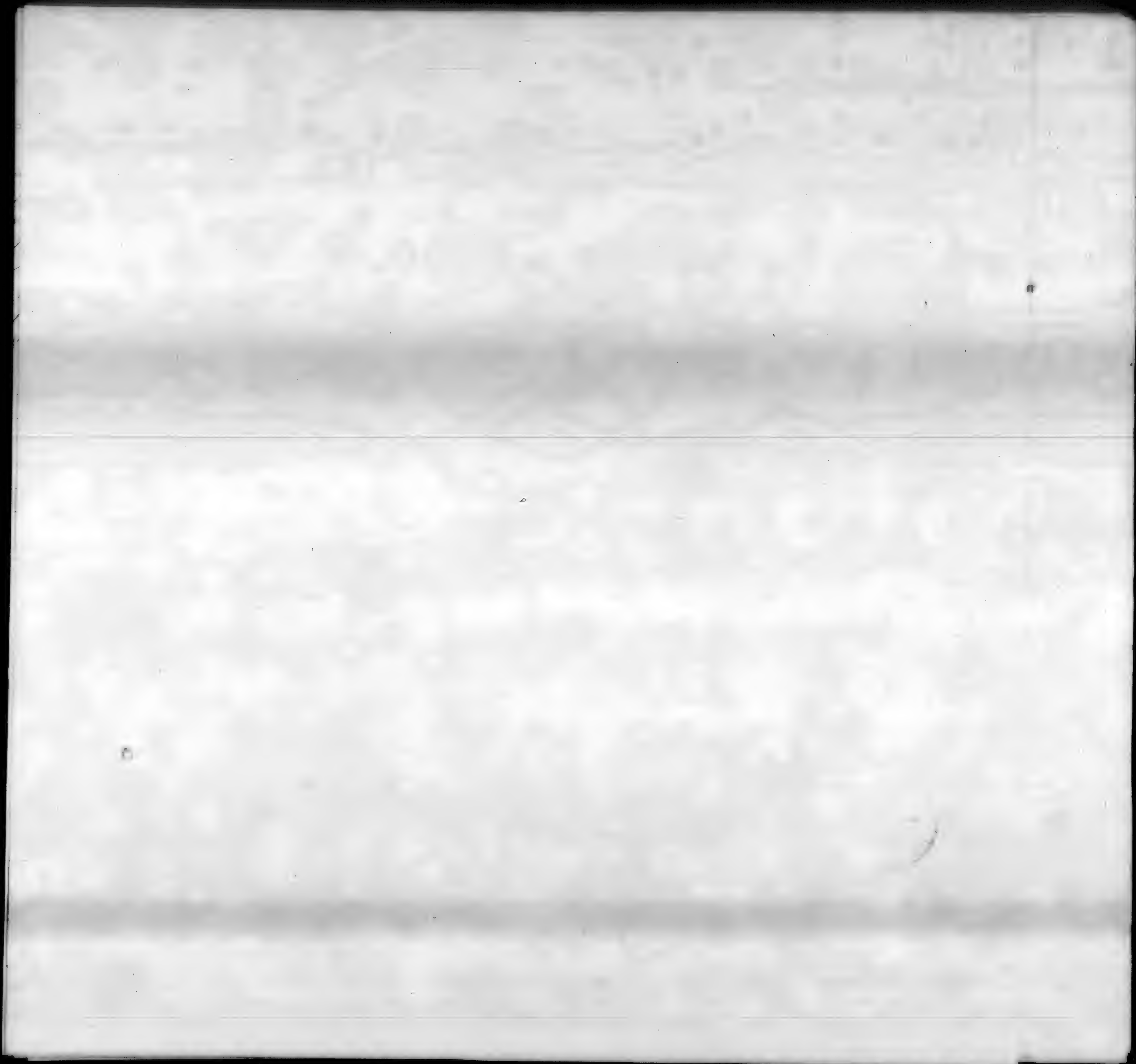
Sailing from Alvaro Obregon, Tab. Mexico, June 27th. 1935 <sup>4th</sup> 9235 Arriving at Port of Philadelphia, Pa. July 5th. 1935 192

| No.<br>ON<br>LIST | NAME IN FULL             |                 | AGE  |      | Sex | Married<br>or<br>Single | IF NATIVE OF UNITED STATES OR INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE. | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES                   |
|-------------------|--------------------------|-----------------|------|------|-----|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|                   | FAMILY NAME              | GIVEN NAME      | Yrs. | Mos. |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 1                 | Satterthwaite            | Linton, Jr.     | 38   | 4    | M   | M                       | Feb. 8th. 1897- Trenton, N.J.                                                                                                               | Am. passport # 164357<br>issued 2/6/32 Wash. D.C.                                                             | 329 South 42nd St.<br>Philadelphia, Penna. |
| 2                 | Satterthwaite            | Margaret C.     | 35   | 3    | F   | M                       | March 6th. 1900- Trenton, N.J.                                                                                                              | " "                                                                                                           | 329 South 42nd St.<br>Philadelphia, Penna. |
| 3                 | Cresson                  | Francis M., Jr. | 24   | 4    | M   | S                       | Feb. 14th. 1911- Philadelphia, Penna.                                                                                                       | Am. passport # 164382<br>issued Wash. D.C. 2/1/33                                                             | 128 Valley Road<br>Ardmore, Penna.         |
| 4                 | Admitted at Philadelphia |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 5                 | July 4, 1935             |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 6                 |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 7                 |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 8                 |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 9                 |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 10                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 11                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 12                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 13                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 14                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 15                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 16                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 17                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 18                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 19                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 20                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 21                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 22                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 23                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 24                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 25                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 26                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 27                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 28                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 29                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |
| 30                |                          |                 |      |      |     |                         |                                                                                                                                             |                                                                                                               |                                            |

-4-

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Number 1.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. *TURRIALBA* sailing from *PORTS AS LISTED BELOW*, AS BELOW, 19, Arriving at Port of *PHILADELPHIA, PENN.* JULY 7, 1935

| No.<br>on<br>List                                                       | NAME IN FULL                                                     |             | AGE       | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES              |
|-------------------------------------------------------------------------|------------------------------------------------------------------|-------------|-----------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------|
|                                                                         | FAMILY NAME                                                      | GIVEN NAME  | Yrs. Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                       |
|                                                                         | <u>PASSENGERS EMBARKED AT PHILADELPHIA, PENN. JUNE 24, 1935.</u> |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 1                                                                       | COLGAN                                                           | ELLA S.     | 28        | F   | S                    | Dunkirk, N.Y.                                                                                                                            | May 6, 1907                                                                                                  | 2773 N. Constitution Rd, Camden, N.J. |
| 2                                                                       | EDMONDS                                                          | J. BRANSON  | 36        | M   | M                    | East Orange, N.J.                                                                                                                        | February 22, 1899                                                                                            | Colwood Apts, West Collingswood, N.J. |
| 3                                                                       | EDMONDS                                                          | HONORE C.   | 31        | F   | M                    | Wallingford, Penn.                                                                                                                       | January 22, 1904                                                                                             | with Husband above.                   |
| 4                                                                       | EDMONSTON                                                        | HELEN F.    | 47        | F   | M                    | Baltimore, Maryland.                                                                                                                     | June 16, 1888.                                                                                               | 2530 Maryland Av, Baltimore, Md.      |
| 5                                                                       | MANLEY                                                           | FLORENCE E. | 33        | F   | S                    | Chicago, Illinois                                                                                                                        | December 23, 1902                                                                                            | 415 Butternut St, Washington, D.C.    |
| <u>PASSENGERS EMBARKED AT PUERTO BARRIOS, GUATEMALA. JUNE 30, 1935.</u> |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 6                                                                       | DAWES                                                            | CURTIS      | 33        | M   | M                    | Marietta, Ohio.                                                                                                                          | September 22, 1901                                                                                           | 283 Beresford Rd, Rochester, N.Y.     |
| 7                                                                       | DAWES                                                            | DOROTHY P.  | 29        | F   | M                    | Rome, New York,                                                                                                                          | April 22, 1906                                                                                               | with Husband above.                   |
| 8                                                                       |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 9                                                                       |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 10                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 11                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 12                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 13                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 14                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 15                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 16                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 17                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 18                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 19                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 20                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 21                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 22                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 23                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 24                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 25                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 26                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 27                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 28                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 29                                                                      |                                                                  |             |           |     |                      |                                                                                                                                          |                                                                                                              |                                       |
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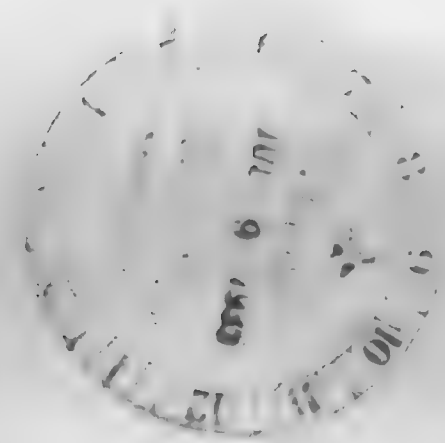
- 5 -

- 5 -

Line UNITED FRUIT  
Owners UNITED FRUIT S.S. CORP.  
Local Agents UNITED FRUIT COMPANY.

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# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

HTW  
S. S.

Sailing from NEW YORK, N. Y. JULY 2, 1930, Arriving at Port of NEW YORK, N. Y. JULY 7, 1930

| No.<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PETERS | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PETERS |
|-------------|--------------|------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
|             | FAMILY NAME  | GIVEN NAME |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 1 ✓         | SMITH        | JOHN       | 34  | M   | 10-12-1896, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 2 ✓         | SMITH        | MARY       | 31  | F   | 10-12-1899, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 3 ✓         | SMITH        | EDWARD     | 28  | M   | 10-12-1902, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 4 ✓         | SMITH        | JOHN       | 25  | M   | 10-12-1905, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 5 ✓         | SMITH        | MARY       | 22  | F   | 10-12-1908, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 6 ✓         | SMITH        | JOHN       | 19  | M   | 10-12-1911, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 7 ✓         | SMITH        | MARY       | 16  | F   | 10-12-1914, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 8 ✓         | SMITH        | JOHN       | 13  | M   | 10-12-1917, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 9 ✓         | SMITH        | MARY       | 10  | F   | 10-12-1920, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 10 ✓        | SMITH        | JOHN       | 7   | M   | 10-12-1923, New York City.                                                                                                               | ✓                                                                                                           | 100 West 15th Street,<br>New York City.                                                                     |
| 11          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 12          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 13          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 14          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 15          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 16          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 17          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 18          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 19          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 20          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 21          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 22          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 23          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 24          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 25          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 26          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 27          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 28          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 29          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |
| 30          |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                                                                             |

-6-

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Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. COMAYAGUA

Sailing from

BARACOA, CUBA

July 6th

, 1923 Arriving at Port of Philadelphia, Pa. - July 11th, 1923

| No.<br>on<br>List | NAME IN FULL |                  | AGE  |      | Sex | MARRIAGE<br>or<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES          |
|-------------------|--------------|------------------|------|------|-----|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------|
|                   | FAMILY NAME  | GIVEN NAME       | Yrs. | Mos. |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 1                 | Galliford    | Mary L.          | 36   | 3    | F   | M                        | April 11, 1889 - Portsmouth, Va.                                                                                                       |                                                                                                             | 220 North Street, Portsmouth, Va. |
| 2                 | Galliford    | Walter I. H. Jr. | 12   | 6    | M   | S                        | Jan. 17, 1923 - Portsmouth, Va.                                                                                                        |                                                                                                             | "                                 |
| 3                 | Galliford    | Virginia W.      | 9    | 6    | F   | S                        | Nov. 12, 1926 - San Diego, Cal.                                                                                                        |                                                                                                             | "                                 |
| 4                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 5                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 6                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 7                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 8                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 9                 |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 10                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 11                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 12                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 13                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 14                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 15                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 16                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 17                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 18                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 19                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 20                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 21                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 22                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 23                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 24                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 25                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 26                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 27                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 28                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 29                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |
| 30                |              |                  |      |      |     |                          |                                                                                                                                        |                                                                                                             |                                   |

*3 US Citizens admitted  
Samuel Horowitz  
U. S. IMMIGRANT INSPECTOR*

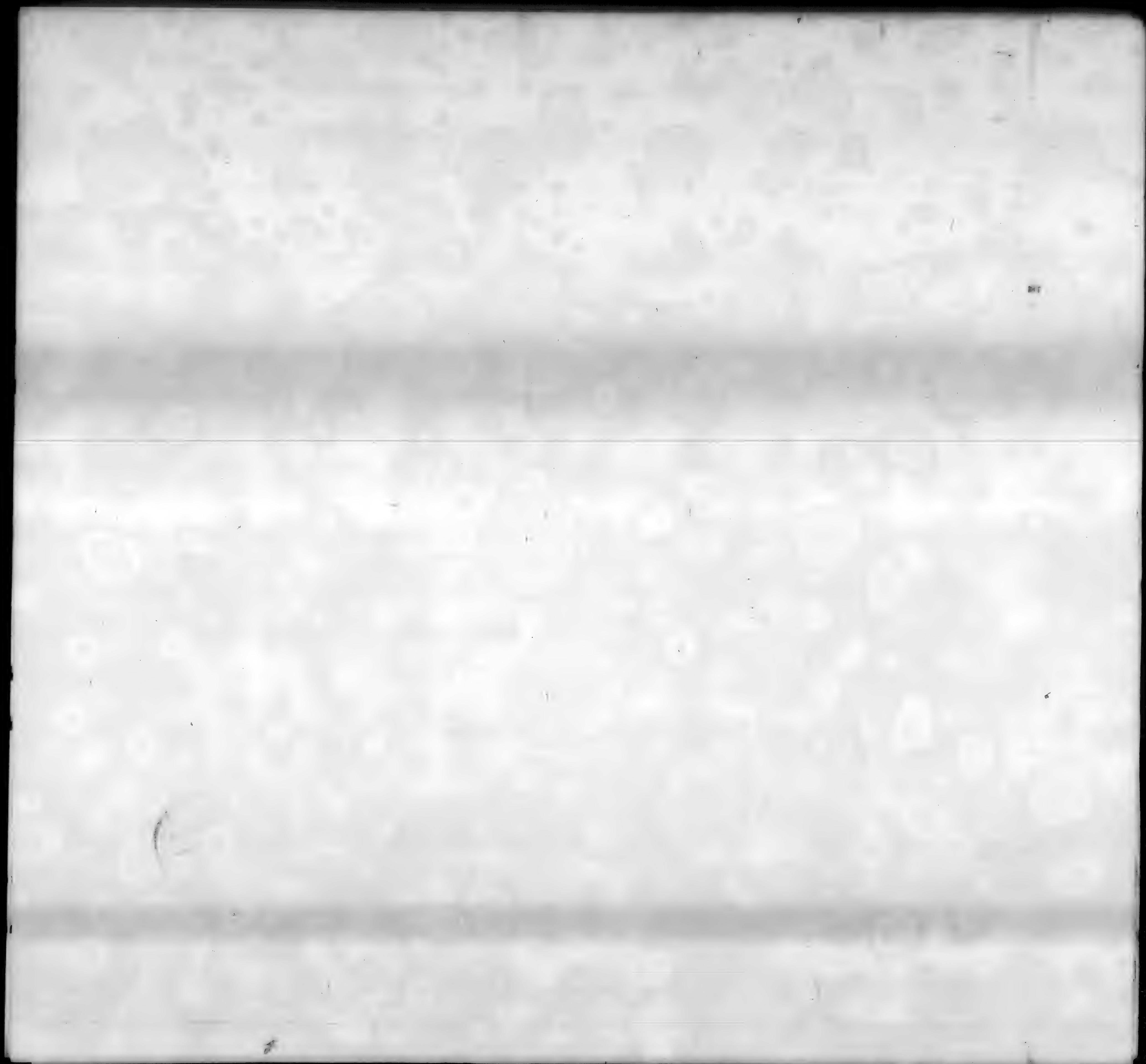
*7 Comayagua*

*-7-*

*C. C. Lissom  
Master*

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Willehm Lundgren, Surgeon of the U. S. Franchise, Philadelphia, Pa., do solemnly, sincerely, and truly declare that I have had thirty years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the Royal Swedish Medical Department, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 25th day of June

at Copenhagen  
Stempel & Logen 2.50 kr.  
Guise de Jorsson  
Notaire Public & Etranger



NOTE.—If a person with such this affidavit of surgeon shall be examined by an immigration officer as part of arrival, and any change of that person's name and any change of the date of this affidavit shall be noted on the manifest as before for a false statement.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                |                   |                                               |
|----------------|-------------------|-----------------------------------------------|
| African black. | Greek.            | Romanian.                                     |
| Armenian.      | Hebrew.           | Russian.                                      |
| Bohemian.      | Herzegovinian.    | Ruthenian (Rusniak).                          |
| Bosnian.       | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.     | Italian (North).  | Scotch.                                       |
| Chinese.       | Italian (South).  | Servian.                                      |
| Croatian.      | Japanese.         | Slovak.                                       |
| Cuban.         | Korean.           | Slovenian.                                    |
| Dalmatian.     | Lithuanian.       | Spanish.                                      |
| Dutch.         | Magyar.           | Spanish American.                             |
| East Indian.   | Mexican.          | Syrian.                                       |
| English.       | Montenegrin.      | Turkish.                                      |
| Finnish.       | Moravian.         | Welsh.                                        |
| Flemish.       | Pacific Islander. | West Indian (other than Cuban).               |
| French.        | Polish.           |                                               |
| German.        | Portuguese.       |                                               |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This pink sheet is for the listing of

3501

S. S. *Swedish* "SVANENHOLM"

Passengers sailing from GOTHENBURG

JUNE 26TH

1935

| 1           | 2                                                                                    | 3            | 4            | 5         | 6   | 7                     | 8                 | 9    | 10                                                   | 11               | 12                                                           | 13     | 14                                                        | 15                                        |                                                                          |       |                                                                                                                      |                          |                  |
|-------------|--------------------------------------------------------------------------------------|--------------|--------------|-----------|-----|-----------------------|-------------------|------|------------------------------------------------------|------------------|--------------------------------------------------------------|--------|-----------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------------------------------------------|--------------------------|------------------|
| No. on List | HEAD-TAX STATUS<br><small>(This column for use of Government officials only)</small> | NAME IN FULL |              | Age       | Sex | Calling or occupation | Able to           |      | Nationality<br>(Country of which citizen or subject) | † Race or people | Place of birth                                               |        | Immigration Visa, Passport Visa, or Reentry Permit number |                                           | Issued                                                                   |       | Data concerning verifications of landings, etc.<br><small>(This column for use of Government officials only)</small> | Last permanent residence |                  |
|             |                                                                                      | Family name  | Given name   | Yrs. Mos. |     |                       | Married or single | Read |                                                      |                  | Read what language (or if exemption claimed, on what ground) | Write  | Country                                                   | City or town, State, Province or District | Prefix number with QIV, NOIV, PV, or RP and give section of act involved | Place |                                                                                                                      | Date                     | Country          |
| 1           | <i>tel</i><br><i>NR</i>                                                              | THUNSTRÖM    | ARNE FRIDOLF | ✓         | 22  | 5                     | M                 | S    | TECHNICAL STUDENT                                    | YES              | SWEDISH                                                      | SCAND. | ✓                                                         | U.S.A. NEW JERSEY                         | 306 NATV SECTION 5                                                       | 6/15  | STOCKHOLM 1935                                                                                                       | ✓                        | SWEDEN STOCKHOLM |
| 2           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 3           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 4           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 5           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 6           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 7           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 8           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 9           |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 10          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 11          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 12          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 13          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 14          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 15          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 16          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 17          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 18          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 19          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 20          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 21          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 22          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 23          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 24          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 25          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 26          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 27          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 28          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 29          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |
| 30          |                                                                                      |              |              |           |     |                       |                   |      |                                                      |                  |                                                              |        |                                                           |                                           |                                                                          |       |                                                                                                                      |                          |                  |

Total passengers . . . .

U. S. citizens . . . .

Aliens . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence for one year or more.  
† List of races will be found on the back of this sheet.



*Last*

The entries on this sheet must be typewritten or printed.

Arriving at Port of **PHILADELPHIA, PA.**

19 33

<sup>1</sup> *Notes.* Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who believes in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member affiliated with any organization entertaining and teaching disbelief in or opposition to organized government, or which teaches the unlawful destruction of property, or who advocates or teaches the seizure, necessity, or propriety of the unlawful assaulting or killing of any officers or civilians, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

Line **SWEDISH AMERICA MEXICO LINE**  
 Owners **SWEDISH AMERICA MEXICO LINE LTD**  
 Local Agents **J A MCCARTHY ESQ, PHILADELPHIA.**



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do  
State or District Major, First, or Second Officer  
 solemnly, sincerely, and truly \_\_\_\_\_ that I have caused the surgeon of said vessel sailing thereunto, or the surgeon  
 employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
 foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own  
 investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
 laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said  
 Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this  
at Phila., Pa

14 day of July,  
1917, at  
Samuel Roberts  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, when it is borne the manifests of Technical Activities, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheet on which the respective names are listed.

Column 2 *Head tax sheet*.—Steam, Hip, Head, Should, back, to enter, in this column. The space is for use of Government charges only.

Column 4 (Age). The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 6 (*Married or single*). The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (*Calling or occupation*). The entry should describe as accurately as possible the occupation, trade or profession of each when arrival in, for example, "Chief Engineer, steamship engineer, locomotive engineer, mining engineer, brass polisher, saw peddler, iron molder, wood turner, etc., and not simply as engineer, painter, builder, farmer, or other broad category descriptions."

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A tenant is one who operates a farm, either for himself or for others.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerk during the personal examination of alien groups.

Column 8 (*Other exceptions*) with 1. This column is subdivided and contains the following question: "Read this language, or, if exemption is claimed, upon what ground?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Nationality*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*). See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

*Special attention should be given to such cases.*

"Special attention should be given to such cases," were three entries of birth, and one of death, recorded at the same place, which were all of Irish origin, and all of them should be carefully reviewed by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

## APPENDIX

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICANS

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BILLY)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIANI E NEGRITUDINE

The people who are native to the basin of the River Po in northern Italy (i. e., components of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Frisian (northern)." Most of these people speak a Galleic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., commitments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*). Prefix serial number of document with abbreviation "QIV," "NQIV," "IV," or "RP," as appropriate, to denote whether it is Costa Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Reciprocity Form; and also state section of the Immigration Act of 1924 involved, as in following:

Column 12. This question has reference to the place and date of issue of the loan receipt described in column 12, and is self-explanatory.

Column 14 (*Limitations of landing, etc.*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

(Column 15) *Abode permanent residence*. Actual or intended residence of one year shall constitute permanent residence. The last country in which such residence with the intention of founding one year or more shall be the last permanent residence, even if the last actual residence therein. The check in column 15 shall denote the country, city or locality of residence, the duration of permanent residence. It is important for legal purposes that statements supported by documents of the last permanent residence independent of country of temporary residence, country of birth, nationality or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded in field 10.

United States and reentering from a visit abroad should be recorded in United States Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*). The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of nearest. If no such relative or friend living in country whence came, give name and address of relative or friend in country of which citizen or subject of such country is recorded, that whence alien came. Address should include street and province.

Column 18 (*Final destination*). The answer to this question shall be the intended future permanent residence. An intended residence of one year shall not constitute permanent residence. The entry should show definitely the place, city or town, of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (*Whether having a ticket to such, foreign nation*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show, directly, the person by whom passage was paid, as self; husband, father, brother, or other relative; or indirectly, the steamship company, etc.

Column 21 (Whether in possession of \$50, and if so, how much) — This column should give in each case (individual or family) the exact amount of money. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 *is neither ever before in the United States; and if so, it is a new and rare date of last departure*. The entries should show whether or not (Yes or No) the United States before and if so, the year (or period of years) and place of birth in the United States. Where in the United States more than one previously, but a last date of departure only, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*)—The answer should show whether going to join either a relative or friend, with name and complete address, and if a relative, the exact relationship.

Columns 23 to 36. These questions are self-explanatory and the answers, like those of the others on the sheet, are submitted by inspection officers to the Government of the aliens. However, in answering question 20, if an alien has been convicted and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



# AFFIDAVIT OF SURGEON

I, ROGER H. ALLBEE, Surgeon of the S.S. "TIVIVES", SAILING THEREWITH, do solemnly, sincerely, and truly SWEAR that I have had FOUR years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of THE STATE OF VERMONT, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

*R. H. Allbee*

Sworn to before me this 14<sup>th</sup> day of July, 1935, at Philadelphia, Pa.

*Lu B. Dole*

U. S. IMMIGRANT INSPECTOR

NOTE: If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigrant inspector at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed. If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Hercegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

502

'Amer.

S. S. "TIVIVES"

*Passengers sailing from* PUERTO BARRIOS, GUATEMALA

JULY 7th,

19 35.

| No. on List                                                                                                   | HEAD-TAX STATUS<br><small>(This column for use of Government officials only)</small> | NAME IN FULL |            | Age       | Sex               | Calling or occupation | Able to |         | Nationality. Country of which citizen or subject | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Reentry Permit number | Issued           | Data concerning verifications of landings, etc. | *Last permanent residence |                  |                                           |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--------------|------------|-----------|-------------------|-----------------------|---------|---------|--------------------------------------------------|----------------|----------------|-------------------------------------------|-----------------------------------------------------------|------------------|-------------------------------------------------|---------------------------|------------------|-------------------------------------------|
|                                                                                                               |                                                                                      | Family name  | Given name | Yrs. Mos. | Married or single |                       | Read    | Write   |                                                  |                | Country        | City or town, State, Province or District |                                                           | Place            | Date                                            |                           | Country          | City or town, State, Province or District |
| 1                                                                                                             |                                                                                      | Arredondo    | Juana      | 33        | F                 | Nurse                 | Yes     | Spanish | Yes                                              | Guatemala      | Sp.Americ.     | Guatemala Canales                         | TV.#2                                                     | Guatemala        | July 6,                                         |                           | Guatemala        | Guatemala                                 |
| 2                                                                                                             | 619121                                                                               | Borley       | Henry J.   | 26        | M                 | Research Officer      | Yes     | English | Yes                                              | England        | English        | England Lowestoft                         | Sec.3(2)<br>Transit Certif.<br>TC.#1                      | Belize, Br.Hond. | July 1, 1935.                                   |                           | British Honduras | Calabash Cay, Turneffe                    |
| <p><i>Lee B. Dolch</i><br/>U. S. IMMIGRANT INSPECTOR</p>                                                      |                                                                                      |              |            |           |                   |                       |         |         |                                                  |                |                |                                           |                                                           |                  |                                                 |                           |                  |                                           |
| <p><i>Local agents:</i><br/><i>United Fruit Co.,</i><br/><i>Pier 9 North,</i><br/><i>Philadelphia, Pa</i></p> |                                                                                      |              |            |           |                   |                       |         |         |                                                  |                |                |                                           |                                                           |                  |                                                 |                           |                  |                                           |

Local agents:  
United Fruit Co.,  
Pier 9 North,  
Philadelphia, Pa.

Head of the M<sup>d</sup> 7/18

Lee B. Dolch —  
U. S. IMMIGRANT INSPECTOR

|                          |   |
|--------------------------|---|
| Total passengers . . . . | 2 |
| U. S. citizens . . . .   | - |
| Aliens . . . .           | 2 |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



## List 2-

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigrant inspector

FIRST-CABIN PASSENGERS ONLY

14-00000

2 alive - 10000  
 10000 - 10000 #. #.

Line United Fruit Co.,  
Owners United Fruit S.S. Corp.,  
Local Agents United Fruit Co.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, FRANK ANQUIS - MASTER, of the AMERICAN S.S. "TIVIVES", from PTO. BARRIOS, GUATEMALA, do solemnly, sincerely, and truly SWEAR that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, ONE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this 14th day of July, 1935 at Philadelphia, Pa.  
Lee D. Dolch  
 Immigrant Inspector.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each point at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924, and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose names bear the initials of Technical A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, and those whose names do not bear such initials. The names of all members of a family shall appear upon the same manifest, but when they travel in the same class and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head last status).—Should be filled in with the name of the alien in the column. The space is for use of Government officials only.

Column 3 (Age).—The age of each alien should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (Sex).—The entry should be either M (male) or F (female).

Column 5 (Married or single).—The answer should be M (married), S (single), and (widowed), or D (divorced).

Column 6 (Occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien, such as, for example, civil engineer, steamship engineer, housewife, painter, engineer, hair dresser, miller, polisher, iron worker, wood turner, etc., and not simply as employee, partner, owner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction in the manifests, and corrections should be made, if necessary, by inspectors before the manifest is closed.

Column 7 (Date of arrival).—The entry is subdivided and contains the following questions: "Read what language he speaks, if any, and if he speaks no language, state that he speaks no language." It is intended to show the language of the alien, and should be filled in with the language spoken by the alien, or if he speaks no language, the word "none" should be written.

Column 8 (Country of birth).—The entry should be filled in with the country of birth of each alien, and should be filled in with the name of the country.

Column 9 (Date of entry).—The entry should be filled in with the date of entry of each alien, and should be filled in with the date of entry.

Column 10 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 11 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 12 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 13 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 14 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 15 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 16 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 17 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 18 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 19 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 20 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 21 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 22 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 23 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 24 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 25 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 26 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 27 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 28 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 29 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 30 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 31 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 32 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 33 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 34 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 35 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 36 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

Column 37 (Date of arrival).—The entry should be filled in with the date of arrival of each alien, and should be filled in with the date of arrival.

Column 38 (Date of departure).—The entry should be filled in with the date of departure of each alien, and should be filled in with the date of departure.

ITALIAN (SOUTH)  
 The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of the record presented).—Prefix serial number of document with abbreviation "QIV," "XIV," "PV," or "RV," as appropriate, to designate whether it is quota Immigration Visa, Nonquota Immigration Visa, Passenger Visa, or Tourist Permit, and also state section of the Immigration Act of 1924 involved, as Section 3 (a).

Column 13. —This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Certification of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence, regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, State, Province, or District of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and who are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (Intend destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and part of intended departure.

Column 19 (Whether having a ticket to such port of destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom fare passage paid).—The entry should show directly by whom passage was paid, as self, husband, father, brother, or other relative, friend, steamship company, etc.

Column 21 (Whether in possession of \$50, and if not, how much).—The answer should give in each case (individual or family) the exact amount of money, in U. S. dollars, brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States, and if so, when, place, and date of last departure).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year or period of years, and place (as, for example, Philadelphia). Where in the United States more than once previously, indicate first and last departure, and also exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should give whether going to join either a relative or friend, with name and complete address, and if a relative, the exact relationship.

Column 24 to 26.—These questions are self-explanatory and the answers, for all aliens, are subject to review by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year, and in answering 24, if alien has been ordered deported and is present at any time, authority in the Secretary of Labor to supply for admission should be shown.

CUBAN  
 The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN  
 "West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH-AMERICAN  
 "Spanish-American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)  
 "African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)  
 The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Amer.

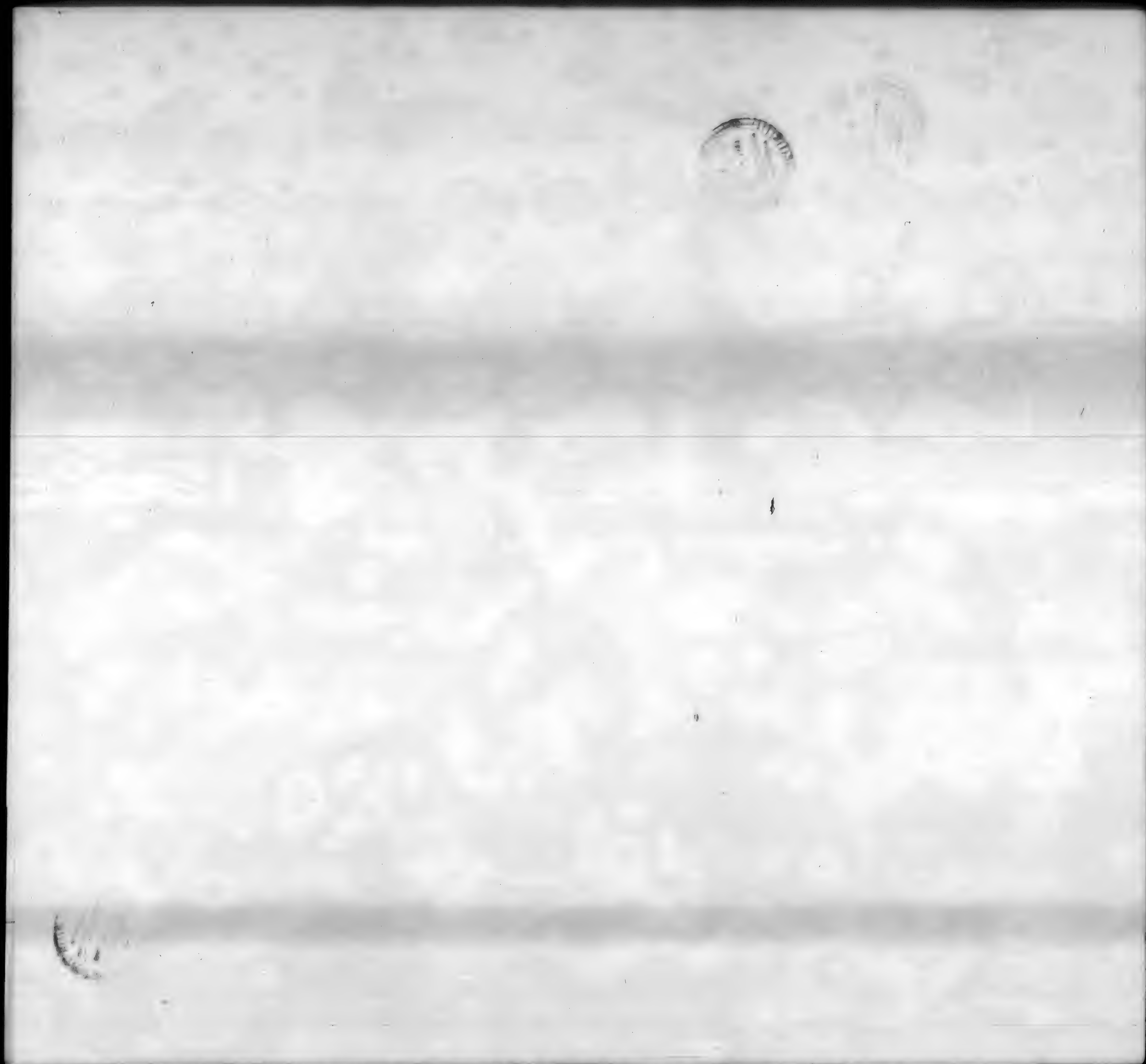
S. S. "TIVIVES" sailing from PUERTO BARRIOS, GUATEMALA, JULY 7th, 1935, Arriving at Port of PHILADELPHIA, PA. - JULY 14th, 1935.  
(via Charleston, S.C.)

| No. on List                                                   | NAME IN FULL |             | AGE | Sex | MARRIED or SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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|                                                               | FAMILY NAME  | GIVEN NAME  |     |     |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| PASSENGERS EMBARKED AT PHILADELPHIA, PA.--JULY 1, 1935.       |              |             |     |     |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| 1                                                             | Clegg        | Esther      | 57  | F   | M                 | January 20, 1878. - Beaver Falls, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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Upsal St, Philadelphia, Pa.            |
| 2                                                             | Clegg        | Margaret    | 31  | F   | S                 | September 18, 1903. - Philadelphia, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| 3                                                             | Downs        | Eleanor V.  | 27  | F   | S                 | March 29, 1908. - Wilmington, Del.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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Stratford Ave, Lansdown, Pa.           |
| 4                                                             | Flynn        | Frank       | 50  | M   | S                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| 5                                                             | Hanthorn     | Charles C.  | 34  | M   | M                 | October 30, 1900. - Philadelphia, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| 6                                                             | Hanthorn     | Ruth L.     | 30  | F   | M                 | March 30, 1905. - Philadelphia, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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Rittenhouse St., Phila., Pa.         |
| 8                                                             | Lavelle      | Anne C.     | 57  | F   | S                 | February 26, 1898. - Boston, Mass.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| 9                                                             | Miles        | Bernard     | 58  | M   | S                 | May 20, 1877. - Baltimore, Md.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| 10                                                            | Rupp         | George A.   | 52  | M   | M                 | August 29, 1902. - Allentown, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| 11                                                            | Rupp         | Jane L.     | 30  | F   | M                 | April 25, 1905. - Oil City, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| 12                                                            | Schroh       | Roy W.      | 31  | M   | M                 | October 2, 1903. - Cleveland, Ohio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| 14                                                            | Whymer       | Joseph      | 33  | M   | S                 | December 18, 1901. - Philadelphia, Pa.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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| 15                                                            | Williams     | Malcolm L.  | 32  | M   | M                 | March 29, 1903. - Oswego, N.Y.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| 16                                                            | Williams     | Sylvia      | 31  | F   | M                 | June 20, 1904. - Watertown, N.Y.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| PASSENGERS EMBARKED AT PTO. BARRIOS, GUATEMALA--JULY 7, 1935. |              |             |     |     |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| 17                                                            | Bay          | Marie       | 24  | F   | S                 | December 21, 1910. - New York City<br>U.S. P.P. #143340 - Washington 8/21/34                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                        | 537 W. 50th St., New York City               |
| 18                                                            | Bay          | Anabelle H. | 42  | F   | M                 | March 18, 1893. - Owshead, Maine<br>(former address - Carthage, N. Y. - 1893 - 1900 - 1901 - 1902 - 1903 - 1904 - 1905 - 1906 - 1907 - 1908 - 1909 - 1910 - 1911 - 1912 - 1913 - 1914 - 1915 - 1916 - 1917 - 1918 - 1919 - 1920 - 1921 - 1922 - 1923 - 1924 - 1925 - 1926 - 1927 - 1928 - 1929 - 1930 - 1931 - 1932 - 1933 - 1934 - 1935 - 1936 - 1937 - 1938 - 1939 - 1940 - 1941 - 1942 - 1943 - 1944 - 1945 - 1946 - 1947 - 1948 - 1949 - 1950 - 1951 - 1952 - 1953 - 1954 - 1955 - 1956 - 1957 - 1958 - 1959 - 1960 - 1961 - 1962 - 1963 - 1964 - 1965 - 1966 - 1967 - 1968 - 1969 - 1970 - 1971 - 1972 - 1973 - 1974 - 1975 - 1976 - 1977 - 1978 - 1979 - 1980 - 1981 - 1982 - 1983 - 1984 - 1985 - 1986 - 1987 - 1988 - 1989 - 1990 - 1991 - 1992 - 1993 - 1994 - 1995 - 1996 - 1997 - 1998 - 1999 - 2000 - 2001 - 2002 - 2003 - 2004 - 2005 - 2006 - 2007 - 2008 - 2009 - 2010 - 2011 - 2012 - 2013 - 2014 - 2015 - 2016 - 2017 - 2018 - 2019 - 2020 - 2021 - 2022 - 2023 - 2024 - 2025 - 2026 - 2027 - 2028 - 2029 - 2030 - 2031 - 2032 - 2033 - 2034 - 2035 - 2036 - 2037 - 2038 - 2039 - 2040 - 2041 - 2042 - 2043 - 2044 - 2045 - 2046 - 2047 - 2048 - 2049 - 2050 - 2051 - 2052 - 2053 - 2054 - 2055 - 2056 - 2057 - 2058 - 2059 - 2060 - 2061 - 2062 - 2063 - 2064 - 2065 - 2066 - 2067 - 2068 - 2069 - 2070 - 2071 - 2072 - 2073 - 2074 - 2075 - 2076 - 2077 - 2078 - 2079 - 2080 - 2081 - 2082 - 2083 - 2084 - 2085 - 2086 - 2087 - 2088 - 2089 - 2090 - 2091 - 2092 - 2093 - 2094 - 2095 - 2096 - 2097 - 2098 - 2099 - 2100 - 2101 - 2102 - 2103 - 2104 - 2105 - 2106 - 2107 - 2108 - 2109 - 2110 - 2111 - 2112 - 2113 - 2114 - 2115 - 2116 - 2117 - 2118 - 2119 - 2120 - 2121 - 2122 - 2123 - 2124 - 2125 - 2126 - 2127 - 2128 - 2129 - 2130 - 2131 - 2132 - 2133 - 2134 - 2135 - 2136 - 2137 - 2138 - 2139 - 2140 - 2141 - 2142 - 2143 - 2144 - 2145 - 2146 - 2147 - 2148 - 2149 - 2150 - 2151 - 2152 - 2153 - 2154 - 2155 - 2156 - 2157 - 2158 - 2159 - 2160 - 2161 - 2162 - 2163 - 2164 - 2165 - 2166 - 2167 - 2168 - 2169 - 2170 - 2171 - 2172 - 2173 - 2174 - 2175 - 2176 - 2177 - 2178 - 2179 - 2180 - 2181 - 2182 - 2183 - 2184 - 2185 - 2186 - 2187 - 2188 - 2189 - 2190 - 2191 - 2192 - 2193 - 2194 - 2195 - 2196 - 2197 - 2198 - 2199 - 2200 - 2201 - 2202 - 2203 - 2204 - 2205 - 2206 - 2207 - 2208 - 2209 - 2210 - 2211 - 2212 - 2213 - 2214 - 2215 - 2216 - 2217 - 2218 - 2219 - 2220 - 2221 - 2222 - 2223 - 2224 - 2225 - 2226 - 2227 - 2228 - 2229 - 2230 - 2231 - 2232 - 2233 - 2234 - 2235 - 2236 - 2237 - 2238 - 2239 - 2240 - 2241 - 2242 - 2243 - 2244 - 2245 - 2246 - 2247 - 2248 - 2249 - 2250 - 2251 - 2252 - 2253 - 2254 - 2255 - 2256 - 2257 - 2258 - 2259 - 2260 - 2261 - 2262 - 2263 - 2264 - 2265 - 2266 - 2267 - 2268 - 2269 - 2270 - 2271 - 2272 - 2273 - 2274 - 2275 - 2276 - 2277 - 2278 - 2279 - 2280 - 2281 - 2282 - 2283 - 2284 - 2285 - 2286 - 2287 - 2288 - 2289 - 2290 - 2291 - 2292 - 2293 - 2294 - 2295 - 2296 - 2297 - 2298 - 2299 - 2300 - 2301 - 2302 - 2303 - 2304 - 2305 - 2306 - 2307 - 2308 - 2309 - 2310 - 2311 - 2312 - 2313 - 2314 - 2315 - 2316 - 2317 - 2318 - 2319 - 2320 - 2321 - 2322 - 2323 - 2324 - 2325 - 2326 - 2327 - 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2471 - 2472 - 2473 - 2474 - 2475 - 2476 - 2477 - 2478 - 2479 - 2480 - 2481 - 2482 - 2483 - 2484 - 2485 - 2486 - 2487 - 2488 - 2489 - 2490 - 2491 - 2492 - 2493 - 2494 - 2495 - 2496 - 2497 - 2498 - 2499 - 2500 - 2501 - 2502 - 2503 - 2504 - 2505 - 2506 - 2507 - 2508 - 2509 - 2510 - 2511 - 2512 - 2513 - 2514 - 2515 - 2516 - 2517 - 2518 - 2519 - 2520 - 2521 - 2522 - 2523 - 2524 - 2525 - 2526 - 2527 - 2528 - 2529 - 2530 - 2531 - 2532 - 2533 - 2534 - 2535 - 2536 - 2537 - 2538 - 2539 - 2540 - 2541 - 2542 - 2543 - 2544 - 2545 - 2546 - 2547 - 2548 - 2549 - 2550 - 2551 - 2552 - 2553 - 2554 - 2555 - 2556 - 2557 - 2558 - 2559 - 2560 - 2561 - 2562 - 2563 - 2564 - 2565 - 2566 - 2567 - 2568 - 2569 - 2570 - 2571 - 2572 - 2573 - 2574 - 2575 - 2576 - 2577 - 2578 - 2579 - 2580 - 2581 - 2582 - 2583 - 2584 - 2585 - 2586 - 2587 - 2588 - 2589 - 2590 - 2591 - 2592 - 2593 - 2594 - 2595 - 2596 - 2597 - 2598 - 2599 - 2600 - 2601 - 2602 - 2603 - 2604 - 2605 - 2606 - 2607 - 2608 - 2609 - 2610 - 2611 - 2612 - 2613 - 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Line United Fruit Co.,  
Owners United Fruit S.S. Corp.,  
Local Agents United Fruit Co.

- IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. GRANADA Sailing from ALFARO, PUNTO CANA, DOMINICAN REPUBLIC July 1913, Arriving at Port of Philadelphia, Pa. July 1913, 1913

| No. on List | Family Name | Given Name | Age | Sex | Married or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | Address in United States               |
|-------------|-------------|------------|-----|-----|-------------------|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------|
| 1           | STEWART     | MARY E.    | 33  | F   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 2           | STEWART     | ANTHONY    | 30  | F   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 3           | STEWART     | JAMES E.   | 26  | M   | S                 | JUNE 14th 1887, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 4           | STEWART     | WILLIAM    | 40  | M   | S                 |                                                                                                                                   |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 5           | STEWART     | VICTORIA   | 32  | F   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 6           | STEWART     | WILLIAM    | 29  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 7           | STEWART     | WILLIAM    | 27  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 8           | STEWART     | WILLIAM    | 25  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 9           | STEWART     | WILLIAM    | 23  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 10          | STEWART     | WILLIAM    | 21  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 11          | STEWART     | WILLIAM    | 19  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 12          | STEWART     | WILLIAM    | 17  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 13          | STEWART     | WILLIAM    | 15  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 14          | STEWART     | WILLIAM    | 13  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 15          | STEWART     | WILLIAM    | 11  | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 16          | STEWART     | WILLIAM    | 9   | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 17          | STEWART     | WILLIAM    | 7   | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 18          | STEWART     | WILLIAM    | 5   | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 19          | STEWART     | WILLIAM    | 3   | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 20          | STEWART     | WILLIAM    | 1   | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 21          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 22          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 23          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 24          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 25          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 26          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 27          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 28          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 29          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |
| 30          | STEWART     | WILLIAM    |     | M   | S                 | ABT. 14th 1880, LANCASTER, PA.                                                                                                    |                                                                                                        | 125 NORTH CHARLOTTE ST. LANCASTER, PA. |

IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







LIST OF UNITED STATES CITIZENS  
FOR THE IMMIGRATION AUTHORITIES

S. S. "LAUREA" (American) Sailing from San Juan, Puerto Rico, July 13, 1923, Arriving at Port of Philadelphia, Pa., July 19, 1923

| No. on List | NAME IN FULL<br>Family Name Given Name | AGE<br>Yrs. Mos. | Sex<br>Male or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------|----------------------------------------|------------------|-----------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|
|-------------|----------------------------------------|------------------|-----------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|

Form 510  
U. S. DEPARTMENT OF LABOR  
Immigration Service

REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. "LAUREA" arriving at the Port of PHILADELPHIA on JULY 19th 1923

| NAME<br>(In full) | SEX | AGE | NATIVITY | CLASS<br>First, sec-<br>ond, third, or<br>steerage | Passenger<br>Manifest<br>Sheet No. | DIAGNOSIS | PRESENT<br>PHYSICAL<br>CONDITION | REMARKS               | (This column reserved for U. S. Medical Examiners) | In this column Immigrant Inspectors will note U. S. Citizens |
|-------------------|-----|-----|----------|----------------------------------------------------|------------------------------------|-----------|----------------------------------|-----------------------|----------------------------------------------------|--------------------------------------------------------------|
| NONE              |     |     |          |                                                    |                                    |           |                                  | No sickness to report |                                                    |                                                              |

To the U. S. Commissioner of Immigration:

I hereby declare that to the best of my knowledge and belief the foregoing is a true and complete statement of the diseases, injuries, births, and deaths among the passengers during the voyage.

Sworn to before me,

U. S. Immigrant Inspector.

C. R. Hooper, Jr. M.D.  
Ship's Surgeon.

Extract from section 16 of the Immigration Act of February 5, 1917: "Inspectors shall have power to administer oaths \* \* \* and any person to whom such an oath has been administered under the provisions of this act who shall knowingly or willfully give false evidence or swear to any false statement in any way affecting or in relation to the right of an alien to admission \* \* \* to the United States, shall be deemed guilty of perjury and be punished as provided by section 15 of the act approved March 1, 1909."

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
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# LIST OF UNITED STATES CITIZENS FOR THE IMMIGRATION AUTHORITIES

S. S. "AMERICAN" (American) Sailing from San Juan, Puerto Rico, July 13, 1925, Arriving at Port of Philadelphia, Pa., July 18, 1925

No. on List NAME IN FULL AGE Sex Married or Single IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS ADDRESS IN UNITED STATES

Diseases, injuries, births, and deaths during the voyage.

## REPORT

Ship's Surgeon

S. S. CRAYADA  
Arrived JULY 18th 1925

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Form 642

## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1927.

## INSTRUCTIONS.

To masters and medical officers of ships, and others concerned:

Under the act of March 14 of the act of Congress of February 5, 1917, it is hereby directed that on the arrival of a ship bringing passengers from a foreign port to any port of the United States the ship's surgeon shall deliver in person to the United States Commissioner of Immigration, or his authorized representative, a complete report of the diseases (including manifestations of epilepsy, hysteria, or insanity), injuries, births, and deaths which have occurred among the passengers during the voyage.

Said report shall state in each instance the name of the passenger concerned; whether a first cabin, second cabin, or steerage passenger or stowaway; the letter or number used to designate the sheet of the passenger manifest on which the said passenger's name is to be found; and the number indicating the position of his name on said sheet; the nature of the disease or injury from which he is or has been suffering and his actual condition at the time of arrival (e. g., "improved," "recovered," "moribund," "dead").

Under the heading "Remarks" the ship's surgeon will make such notations as "able to travel," "accompanied by family," "removed at quarantine," "removed at quarantine with family," "in ship's hospital," or other remarks which may be of assistance to the United States Immigration officers in protecting the welfare of the sick or in accounting for missing passengers.

Diseases and all other statements appearing in said report must be written legibly, but need not be in English if the ship's surgeon be more familiar with another language. The ship's surgeon shall furthermore declare on oath that to the best of his knowledge and belief this report, as herein prescribed, comprises a true and complete statement of all the diseases, injuries, births, and deaths which have occurred during the voyage.

The Commissioners of Immigration at the various ports of the United States have full authority to prevent the debarkation of the passengers from a ship until the ship's surgeon, or, in lieu thereof, the master of the ship, shall have furnished a medical report, as above indicated.

W. W. HUSBAND,  
Commissioner General of Immigration.

APPROVED:  
JAMES J. DAVIS,  
Secretary of Labor.

## TRADUZIONE D'ISTRUZIONI

Al capitano e medici di navi ed a chiunque spetti:

A norma del paragrafo 14 dell'Atto del Congresso degli Stati Uniti, il 5 di Febbraio, 1917, viene con questo mezzo decretato che, all'arrivo in un porto degli Stati Uniti d'una nave, che trasporta passeggeri da un porto estero, il medico di bordo dovrà consegnare personalmente nelle mani del Commissario d'Immigrazione (Commissioner of Immigration), o del suo rappresentante autorizzato, un completo rapporto di tutte le malattie, compresi gli incidenti d'epilessia, d'isterismo, o d'insania, le ferite, le nascite, e le morti, che siano avvenute durante il viaggio fra i passeggeri.

Detto rapporto dovrà indicare in ogni caso il nome del passeggero in questione, la sua condizione a bordo, se passeggero di prima, seconda, terza classe o clandestino; portare la lettera o il numero del foglio del manifesto sul quale è inserito il nome del detto passeggero; altresì il numero d'ordine, che serve a indicare la posizione del suo nome sul foglio medesimo; spiegare la natura del male, che esso soffre e alla lettera, e la sua condizione fisica al momento d'arrivo, p. es., "migliorato," "guarito," "moribondo," "morto."

Sotto la rubrica "Remarks," il medico di bordo dovrà apporre tali annotazioni come, p. es.: "abile a continuare il viaggio," "accompagnato da famiglia," "lasciato a quarantena," "lasciato a quarantena con famiglia," "nell'ospedale a bordo," o qualsiasi annotazione, che possa essere d'aiuto agli uffici d'immigrazione, sia per proteggere gli interessi degli ammalati, sia per rendersi conto dei passeggeri mancanti.

La diagnosi ed ogni altra dichiarazione dovranno essere scritte in modo leggibile; però non necessariamente in Inglese, se il medico di bordo conosce a meglio un'altra lingua.

Il medico di bordo dovrà altresì dichiarare sotto giuramento, per quanto a lui consta in lingua fedele, che il suo rapporto comprende una esatta e piena descrizione di tutte le malattie, le ferite, le nascite e le morti, che siano successe durante il viaggio.

I Commissari d'Immigrazione nei diversi porti degli Stati Uniti hanno pieno potere per impedire lo sbarco ai passeggeri d'una nave, sino a che il medico, o mancando il medico, il capitano della nave stessa avrà fornito loro il rapporto come sopra indicato.

## UEBERSETZUNG DER INSTRUCTIONS.

An die Schiffsführer, Schiffärzte, und andere, die es betrifft:

Auf Grund des Abschnitts 14 der Congressgesetze vom 5. Februar, 1917, wird hiermit angedeutet, dass der Schiffarzt eines jeden von einem ausländischen Hafen kommenden und in einen Hafen der Vereinigten Staaten einlaufenden Passagierschiffes persönlich dem Einwanderungs-Kommissar oder seinem bevollmächtigten Stellvertreter einen vollständigen Bericht über Krankheiten (insbegriffen Krankheiten von Epilepsie, Hysterie, oder Insane), Verletzungen, Geburten, und Todesfälle, die während der Reise unter den Passagieren zu verzeichnet waren, zu übergeben hat.

Dieser Bericht muss in jedem einzelnen Falle den Namen des betreffenden Passagiers enthalten; ferner ob er in erster oder zweiter Klasse sich befand, ob er als Zwischenstube-Passagier oder als blinder Passagier (stowaway) die Reise machte; ferner den Buchstaben oder die Nummer mit denen man gewöhnlich die Seite des Passagiermanifestes, in welchem der Name des betreffenden Passagiers eingeschrieben ist, bezeichnet, und ebenso die Zahl, welche die Stelle des Namens auf der erwähnten Seite bestimmt. Auch soll die Natur der Krankheit oder der Unpassierlichkeit, an welcher der Passagier leidet oder litt und sein tatsächliches Befinden zur Zeit der Ankunft dargelegt sein (z. B., ob "gebessert," "hergestellt," oder "im Sterben," "tot").

In der Rubrik "Remarks," soll der Schiffarzt solche Notizen verzeichnen wie, z. B., "reisefähig," "in Begleitung von Familie," "in Quarantäne gehalten," "mit Familie in Quarantäne gehalten," "im Schiffsspital," oder andere Anmerkungen, welche der Einwanderungsbehörde der Vereinigten Staaten für die Verpflegung der Kranken oder für die Aufklärung über fehlende Passagiere von Nutzen sein können.

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

LIST OF UNITED STATES CITIZENS  
FOR THE IMMIGRATION AUTHORITIES

S. S. "BARBARA" (American) Sailing from San Juan, Puerto Rico, July 13, 1923, Arriving at Port of Philadelphia, Pa., July 18, 1923

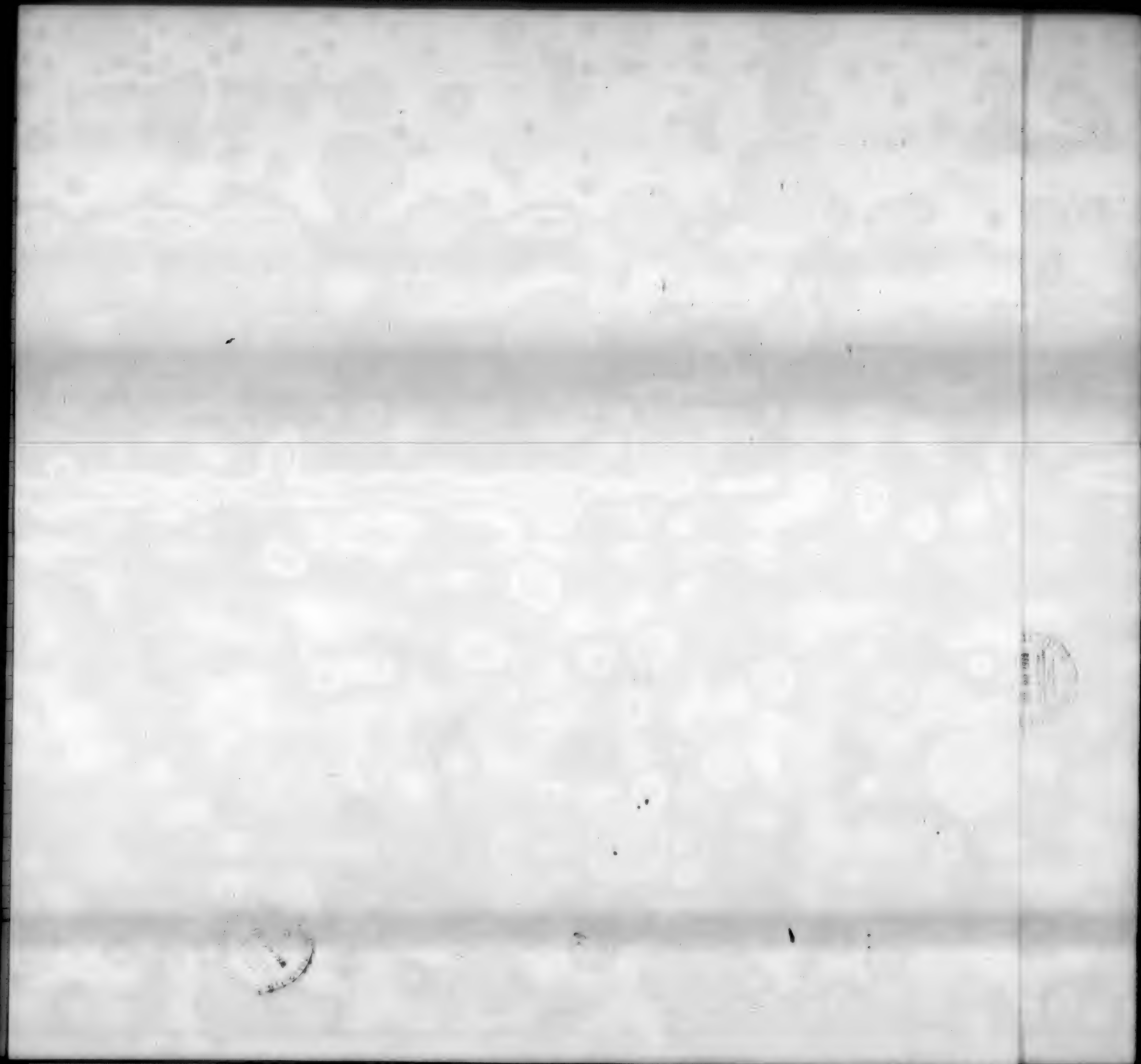
| No.<br>of<br>List | NAME IN FULL |            | AGE |     | Sex.<br>Married<br>or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF<br>COURT WHICH ISSUED NATURALIZATION<br>PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                     |
|-------------------|--------------|------------|-----|-----|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
|                   | Family Name  | Given Name | Yrs | Mos |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 1                 | Landowski    | Edward     | 12  | 5   | M                            | Brooklyn, N. Y., February 14, 1912                                                                                                       | Produced: Bureau's Protection<br>Certificate # 37223 N.Y. dated<br>February 14, 1912                         | Father: Louis Landowski, 195 Briggs<br>Ave., Brooklyn, N. Y. |
| 2                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 3                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 4                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 5                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 6                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 7                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 8                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 9                 |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 10                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 11                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 12                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 13                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 14                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 15                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 16                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 17                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 18                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 19                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 20                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 21                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 22                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 23                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 24                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 25                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 26                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 27                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 28                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 29                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |
| 30                |              |            |     |     |                              |                                                                                                                                          |                                                                                                              |                                                              |

1 - Showaway M. Harty, admitted  
Inspector.

- 12 -

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Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. "ARAPAHO" (American) sailing from San Juan, Puerto Rico, July 13, 1935, Arriving at Port of Philadelphia, Pa., July 18, 1935

| No.<br>and<br>Line | NAME IN FULL         |                | AGE  |      | Sex | Manner of<br>Acquisition | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                 |
|--------------------|----------------------|----------------|------|------|-----|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------|
|                    | Family Name          | Given Name     | Yrs. | Mos. |     |                          |                                                                                                                                          |                                                                                                              |                                          |
| 1                  | Alcater              | Eugenia        | 29   | -    | F.  | S.                       | New York, N. Y., January 29, 1907                                                                                                        |                                                                                                              | 4220 Kissena Blvd., Flushing, L.I., N.Y. |
| 2                  | Alcater              | Dolores        | 27   | -    | F.  | S.                       | New York, N. Y., November 29, 1911                                                                                                       |                                                                                                              | do.                                      |
| 3                  | Andrey, Ferrer de    | Sylvia         | 29   | -    | F.  | M.                       | Brooklyn, N. Y., October 9, 1905                                                                                                         | ✓                                                                                                            | 100 W. 80th St., New York, N.Y.          |
| 4                  | Alfrey               | Jarah Mercedes | 3    | -    | F.  | S.                       | San Juan, P. R., March 19, 1927                                                                                                          |                                                                                                              | do.                                      |
| 5                  | Alfrey               | Sylvia         | 7    | -    | F.  | S.                       | San Juan, P. R., October 26, 1921                                                                                                        | ✓                                                                                                            | do.                                      |
| 6                  | Barber               | Frances        | 61   | -    | F.  | M.                       | Tacoma, W. Va., December 16, 1874                                                                                                        |                                                                                                              | 242 Hillside Pl., Richmond, N.J.         |
| 7                  | Barbour              | William H.     | 45   | -    | M.  | M.                       | Midway, Pa., June 9, 1890                                                                                                                | ✓                                                                                                            | U.S. Forest Service, Washington, D.C.    |
| 8                  | Cartada              | Glorinda       | 24   | -    | F.  | M.                       | Adjuntas, P. R., September 1, 1911                                                                                                       | ✓                                                                                                            | 47 Poplar Ave., Deal, N.J.               |
| 9                  | Cartada              | George         | 4    | -    | M.  | S.                       | Long Branch, N. J., June 23, 1931                                                                                                        | ✓                                                                                                            | do.                                      |
| 10                 | Cartada              | Yvonne         | -    | ✓    | F.  | S.                       | Long Branch, N. J., February 15, 1935                                                                                                    |                                                                                                              | do.                                      |
| 11                 | Estasen, Polg Via de | Onita          | 39   | -    | F.  | M.                       | Santurce, P. R., July 27, 1895                                                                                                           | ✓                                                                                                            | 600 W. 123rd St., New York, N.Y.         |
| 12                 | Estasen Polg         | Sylvia         | 16   | -    | F.  | S.                       | Santurce, P. R., August 9, 1918                                                                                                          |                                                                                                              | do.                                      |
| 13                 | Estasen Polg         | Olga           | 15   | -    | F.  | S.                       | Santurce, P. R., March 17, 1920                                                                                                          |                                                                                                              | do.                                      |
| 14                 | Estasen Polg         | Irma           | 11   | -    | F.  | S.                       | Santurce, P. R., February 13, 1924                                                                                                       |                                                                                                              | do.                                      |
| 15                 | Estasen Polg         | Fernando       | 20   | -    | M.  | S.                       | Santurce, P. R., November 29, 1914                                                                                                       |                                                                                                              | do.                                      |
| 16                 | Ferrer               | Flay R.        | 51   | -    | M.  | M.                       | Mayaguez, P. R., March 29, 1884                                                                                                          | ✓                                                                                                            | 100 W. 80th St., New York, N.Y.          |
| 17                 | Fortee               | Richard H.     | 32   | -    | M.  | M.                       | Fairmont, Neb., January 11, 1902                                                                                                         | ✓                                                                                                            | Mo. Coal Junction, Neb.                  |
| 18                 | Fortee               | Mildred        | 24   | -    | F.  | M.                       | Mo. Coal Junction, Neb., May 9, 1911                                                                                                     | ✓                                                                                                            | do.                                      |
| 19                 | Fussa                | Blanche        | 22   | -    | F.  | M.                       | Brooklyn, N. Y., September 19, 1912                                                                                                      | ✓                                                                                                            | 311 Sackett St., Brooklyn, N.Y.          |
| 20                 | Getzel               | Magdalena      | 26   | -    | F.  | S.                       | Mayaguez, P. R., March 26, 1909                                                                                                          |                                                                                                              | 840 W. 143rd St., New York, N.Y.         |
| 21                 | Gonzalez             | Luis M.        | 31   | -    | M.  | M.                       | Rio Piedras, P. R., January 11, 1904                                                                                                     | ✓                                                                                                            | Henry Phillips Inst., Philadelphia, Pa.  |
| 22                 | Gulleraz             | Altagracia I.  | 67   | -    | F.  | M.                       | Nuevitas, Cuba, March 28, 1869                                                                                                           | By marriage to American citizen 1887 ✓                                                                       | Plattsburg Barracks, Plattsburg, N.Y.    |
| 23                 | Hollingsworth        | Lillian F.     | 32   | -    | F.  | M.                       | Cloverport, Ky., May 2, 1907                                                                                                             | ✓                                                                                                            | 617 Logan St., Frankfort, Ky.            |
| 24                 | Jonston              | John T.        | 48   | -    | M.  | S.                       | Chapel Hill, N. C., November 6, 1887                                                                                                     |                                                                                                              | Route 2, Chapel Hill, N.C.               |
| 25                 | Kimerer              | Viola Alberta  | 24   | -    | F.  | S.                       | Tutwiler, Miss., February 19, 1911                                                                                                       |                                                                                                              | Tutwiler, Miss.                          |
| 26                 | Kimerer              | Arnes Mae      | 19   | -    | F.  | S.                       | Tutwiler, Miss., December 22, 1916                                                                                                       |                                                                                                              | do.                                      |
| 27                 | Margarida            | Fernando       | 42   | -    | M.  | M.                       | San Juan, P. R., September 27, 1892                                                                                                      |                                                                                                              | Hotel Taft, New York, N.Y.               |
| 28                 | Margarida, Nora de   | Aurea          | 40   | -    | F.  | M.                       | Mayaguez, P. R., March 11, 1895                                                                                                          |                                                                                                              | do.                                      |
| 29                 | Margarida            | Julia          | 14   | -    | F.  | S.                       | San Juan, P. R., July 22, 1921                                                                                                           |                                                                                                              | do.                                      |
| 30                 | Margarida            | Carlos         | 12   | -    | M.  | S.                       | San Juan, P. R., December 30, 1922                                                                                                       |                                                                                                              | do.                                      |

30 Notably admitted  
has been

Inspector 7/18/35

- 13 -

Furser, as "ARAPAHO"

Line Baltimore Harbor  
Owners W. H. Bull & Co., Inc.  
Local Agents W. H. Bull & Co., Inc.

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Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. "RAMONA" American

sailing from San Juan, Puerto Rico

July 13

, 19 35, Arriving at Port of Philadelphia, Pa., July 18

, 19 35

| No. on List | NAME IN FULL        |                | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                      |
|-------------|---------------------|----------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------|
|             | FAMILY NAME         | GIVEN NAME     |     |     |                                                                                                                                    |                                                                                                        |                                               |
| 1           | Montoya             | Jaime A.       | 28  | M.  | S. Anasco, P. R., February 28, 1907                                                                                                |                                                                                                        | 917 President St., Brooklyn, N.Y. ✓           |
| 3           | Nusbaum             | Sylvan         | 22  | M.  | S. Atlanta, Ga., February 1, 1913 ✓                                                                                                |                                                                                                        | 3446 Auchentoly Terr., Baltimore, Md. ✓       |
| 4           | Padilla, Aguilar de | America        | 38  | F.  | M. Mayama, P. R., September 5, 1903 ✓                                                                                              |                                                                                                        | 3804 N. 10th St., Philadelphia, Pa. ✓         |
| 5           | Padilla             | Mildred        | 10  | F.  | S. Arecibo, P. R., November 25, 1924                                                                                               |                                                                                                        | do. ✓                                         |
| 6           | Perez               | Carmen Teresa  | 24  | F.  | S. Catano, P. R., September 14, 1911                                                                                               |                                                                                                        | 901 T. St., Washington, D.C. ✓                |
| 7           | Power               | Angel          | 43  | M.  | M. San Juan, P. R., August 15, 1902                                                                                                |                                                                                                        | 169 W. 182nd St., New York, N.Y. ✓            |
| 8           | Purcell             | Aadora M.      | 29  | F.  | M. Las Piedras, P. R., January 6, 1906 ✓                                                                                           |                                                                                                        | C/O U.S. Navy, Navy Bldg., Washington, D.C. ✓ |
| 9           | Ramos Dominguez     | Daniel S.      | 31  | M.  | M. Barceloneta, P. R., July 20, 1904                                                                                               |                                                                                                        | 1373 40th St., Brooklyn, N.Y. ✓               |
| 10          | Rodriguez           | Julia S.       | 53  | F.  | M. Washington, D. C., July 27, 1881                                                                                                |                                                                                                        | 901 T. St., Washington, D.C. ✓                |
| 11          | Rodriguez           | Ramundo M.     | 17  | M.  | M. Santurce, P. R., September 9, 1922                                                                                              |                                                                                                        | do. ✓                                         |
| 12          | Salt                | Samuel Isaac   | 16  | F.  | M. San Juan, P. R., August 6, 1918 ✓                                                                                               |                                                                                                        | Hotel Vendome, Boston, Mass. ✓                |
| 13          | Savage              | Centrule Smith | 29  | F.  | M. Boston, Mass., December 8, 1905                                                                                                 |                                                                                                        | do. ✓                                         |
| 14          | Sawyer              | Gena           | 24  | F.  | M. New York, N.Y., September 9, 1910 ✓                                                                                             |                                                                                                        | 1768 Beacon St., Franklin, Mass. ✓            |
| 15          | Yove                | Josefina       | 28  | F.  | M. Valerido, P. R., December 24, 1907                                                                                              |                                                                                                        | 4820 Kissers Blvd., Flushing, L.I., N.Y. ✓    |
| 16          | Yove                | Willie         | 20  | F.  | M. Valerido, P. R., April 5, 1915 ✓                                                                                                |                                                                                                        | do. ✓                                         |
| 17          | Yoshura             | Charles        | 47  | M.  | M. Towanda, N. Y., June 11, 1888                                                                                                   |                                                                                                        | 1100 N. La Salle St., Chicago, Ill. ✓         |
| 18          | Yoshura             | Helene         | 40  | F.  | M. Chicago, Ill., December 10, 1894                                                                                                |                                                                                                        | do. ✓                                         |
| 19          | Yoshura             | Margarita      | 8   | F.  | M. San Juan, P. R., December 27, 1927                                                                                              |                                                                                                        | do. ✓                                         |
| 20          | Craigie             | F. H. H. on    | 35  | M.  | M. 24 N. Lincoln St., N.Y. 11/15/05                                                                                                |                                                                                                        | 1617 N. Lincoln St., N.Y. 24                  |

*Passenger work to  
make list of names, 2/28/35  
Haltinist - some made by me, 2/28/35  
- 14 -*

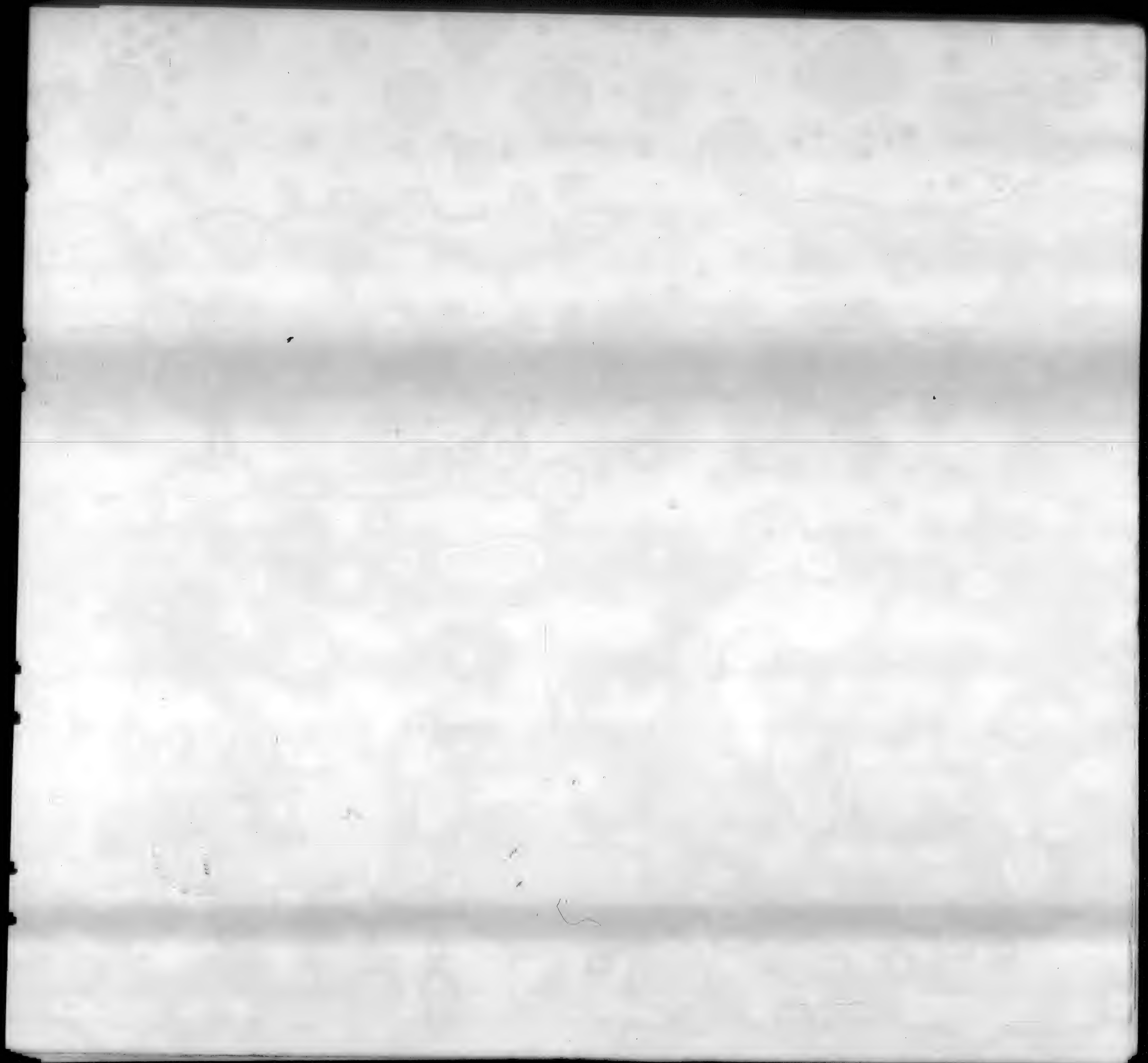
*[Signature]*  
Tolson, esp. "Haltinist"

*17 2/28/35 admitted  
Haltinist  
Haltinist 4/1/35*

Line Baltimore Insular  
Owners A. H. Hall & Co., Inc.  
Local Agents A. H. Hall & Co., Inc.

IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
years' experience as a Physician  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

*Aliens Originally on Boston manifest, Boston file 1836/58, our file # 4419/326,  
and transferred to attached manifest. H.*

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                                  |
|------------------|-------------------|--------------------------------------------------|
| African (black). | Greek.            | Roumanian.                                       |
| Armenian.        | Hebrew.           | Russian.                                         |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russink).                             |
| Bosnian.         | Irish.            | Scandinavian (Norwegians,<br>Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                          |
| Chinese.         | Italian (South).  | Servian.                                         |
| Croatian.        | Japanese.         | Slovak.                                          |
| Cuban.           | Korean.           | Slovenian.                                       |
| Dalmatian.       | Lithuanian.       | Spanish.                                         |
| Dutch.           | Magyar.           | Spanish American.                                |
| East Indian.     | Mexican.          | Syrian.                                          |
| English.         | Montenegrin.      | Turkish.                                         |
| Finnish.         | Moravian.         | Welsh.                                           |
| Flemish.         | Pacific Islander. | West Indian (other than<br>Cuban).               |
| French.          | Polish.           |                                                  |
| German.          | Portuguese.       |                                                  |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a part of continental United States  
This (yellow) sheet is for the listing of

3503

N. M. S. TOPEKA

Passengers sailing from BERGEN

JUNE 27, 1935

| 1           | 2                                                                     | 3            | 4          | 5    | 6    | 7   | 8                     | 9        | 10                                                            | 11    | 12                                                    | 13               | 14             | 15           |                         |            |               |                            |              |
|-------------|-----------------------------------------------------------------------|--------------|------------|------|------|-----|-----------------------|----------|---------------------------------------------------------------|-------|-------------------------------------------------------|------------------|----------------|--------------|-------------------------|------------|---------------|----------------------------|--------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |            | Age  |      | Sex | Calling or occupation | Able to— |                                                               |       | Nationality.<br>(Country of which citizen or subject) | † Race or people | Place of birth |              | Immigration Visa Number | Issued at— | Date          | * Last permanent residence |              |
|             |                                                                       | Family name  | Given name | Yrs. | Mos. |     |                       | Read     | Read what language (or, if exception claimed, on what ground) | Write |                                                       |                  | Country        | City or town |                         |            |               | Country                    | City or town |
| 1           | Form 514<br># 61756                                                   | HAALAND      | HAARON     | 33   | 6    | M   | S. ELECTRICIAN        | YES      | NORWEGIAN                                                     | YES   | NORWAY                                                | SCANDINAV        | NORWAY         | KIRKEBO      | 263-3(3)                | OSLO       | JUNE 19, 1935 | NORWAY                     | KIRKEBO      |
| 2           | Form 514<br># 61757                                                   | LASSEN       | HAROLD     | 22   | 9    | M   | M GALLEYBOY           |          | "                                                             |       | "                                                     | "                | "              | SKJEBERG     | 259-3(3)                | "          | JUNE 17, 1935 | "                          | SKJEBERG     |
| 3           | Form 514<br># 61758                                                   | FOSS         | BIRGER     | 22   | 10   | M   | S DECKBOY             |          | "                                                             |       | "                                                     | "                | "              | FRISTAD      | 248-3(3)                | "          | JUNE 17, 1935 | "                          | FRISTAD      |
| 4           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 5           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 6           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 7           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 8           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 9           |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 10          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 11          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 12          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 13          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 14          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 15          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 16          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 17          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 18          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 19          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 20          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 21          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 22          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 23          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 24          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 25          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 26          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 27          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 28          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 29          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |
| 30          |                                                                       |              |            |      |      |     |                       |          |                                                               |       |                                                       |                  |                |              |                         |            |               |                            |              |

3 alien passengers  
admitted under Sec. 3(3)  
in transit to join wife  
of alien now at  
Samuel's property

Head In Dec 28/30  
late a 73  
MAG

Local Agents - J.A. McCarthy  
Lafayette Blvd.  
Phila., Pa.

3 alien passengers  
admitted under Sec. 3(3)  
in transit to join their  
relatives in the U.S.  
as shown by Samuel's  
immigration papers

Head Tax Dec # 283, 20  
late a 73  
M.D.G.

Local Agents - J.A. McCarthy  
Lafayette Blvd.  
Phila., Pa.

Total passengers . . . . . 3  
U. S. citizens . . . . . 0  
Aliens . . . . . 3

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
SECOND-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of XXXXXXXXXX PHILADELPHIA, PENNA, JULY 17<sup>TH</sup>, 19 35

| 16          | 17                                                                                       | 18                                                          | 19                                                                                                                                                                                      | 20                                                | 21                                                    | 22                                                                                                                   | 23                                                                                                                | 24                                                                                                                                                                                                                                                                                                                  | 25                                                                                                                                                                                                                                                                                              | 26                   | 27                   | 28                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 29                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 30                                                         | 31                                       | 32                                                      | 33                       | 34                        | 35                      | 36 |     |      |      |
|-------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|---------------------------|-------------------------|----|-----|------|------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came | Final destination<br>(*Intended future permanent residence) | By whom was passage paid?<br>(Whether alien paid for own passage, whether paid by relative, whether paid by any other person, or by any corporation, society, community, or government) | Whether having a ticket to such final destination | Whether in possession of \$20. and if less, how much? | Whether ever before in the United States; and if so, when and where?<br>If yes—<br>Year or period of years<br>Where? | Whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address | Purpose of coming to United States<br>Whether alien intends to return to country whence he came, after remaining in the United States for a period of less than one year, or whether he intends to remain in the United States for a longer period, or whether he intends to become a resident of the United States | Whether alien is known to be in possession of a license to practice any profession, occupation, or trade, or is engaged in any business, or is a member of any organization, or is a member of any political party, or is a member of any social club, or is a member of any other organization | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character | Whether coming to United States as an officer, or as a member of the crew of a vessel, or as a member of the crew of an aircraft, or as a member of the crew of a motor vehicle, or as a member of the crew of a motor boat, or as a member of the crew of a motor car, or as a member of the crew of a motor truck, or as a member of the crew of a motor bus, or as a member of the crew of a motor coach, or as a member of the crew of a motor train, or as a member of the crew of a motor ship, or as a member of the crew of a motor vessel, or as a member of the crew of a motor aircraft, or as a member of the crew of a motor vehicle, or as a member of the crew of a motor boat, or as a member of the crew of a motor car, or as a member of the crew of a motor truck, or as a member of the crew of a motor bus, or as a member of the crew of a motor coach, or as a member of the crew of a motor train, or as a member of the crew of a motor ship, or as a member of the crew of a motor vessel | Whether alien has been previously deported within one year | Condition of health, mental and physical | Deformed or crippled, Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of—<br>Hair<br>Eyes | Marks of identification |    |     |      |      |
| 1           | MRS. J. HAALAND KIRKEBO, SOGN, NORWAY                                                    | TRANSFERRED TO U.S. TALISMAN IN NEW YORK                    | WILH. WILHELMSSEN OSLO                                                                                                                                                                  | YES                                               | NO                                                    |                                                                                                                      | NONE                                                                                                              | ✓                                                                                                                                                                                                                                                                                                                   | ✓                                                                                                                                                                                                                                                                                               | ✓                    | ✓                    | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ✓                                                          | ✓                                        | GOOD                                                    | NO                       | 5                         | 10                      | W  | BLD | BLUE | NONE |
| 2           | MRS. ELLEN LASSEN, SANDEFJORD, NORWAY                                                    | ✓                                                           | ✓                                                                                                                                                                                       | ✓                                                 | ✓                                                     |                                                                                                                      | ✓                                                                                                                 | ✓                                                                                                                                                                                                                                                                                                                   | ✓                                                                                                                                                                                                                                                                                               | ✓                    | ✓                    | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ✓                                                          | ✓                                        | ✓                                                       | ✓                        | 5                         | 10                      | ✓  | ✓   | ✓    | ✓    |
| 3           | MRS. AGNES FOSS, FR. STAD, NORWAY                                                        | ✓                                                           | ✓                                                                                                                                                                                       | ✓                                                 | ✓                                                     |                                                                                                                      | ✓                                                                                                                 | ✓                                                                                                                                                                                                                                                                                                                   | ✓                                                                                                                                                                                                                                                                                               | ✓                    | ✓                    | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ✓                                                          | ✓                                        | ✓                                                       | ✓                        | 5                         | 11                      | ✓  | ✓   | ✓    | ✓    |
| 4           | FR. STAD                                                                                 |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 5           |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 6           |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 7           |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 8           |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 9           |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 10          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 11          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 12          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 13          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 14          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 15          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 16          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 17          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 18          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 19          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 20          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 21          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 22          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 23          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 24          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 25          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 26          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 27          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 28          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 29          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |
| 30          |                                                                                          |                                                             |                                                                                                                                                                                         |                                                   |                                                       |                                                                                                                      |                                                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                 |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                            |                                          |                                                         |                          |                           |                         |    |     |      |      |

3 passengers  
3 alien  
Examined  
D.H.C.  
H.A.S. U.S.P.H.S.

-15-

NOTE.—Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, E. Ginnes <sup>Master</sup>, of the Romagnolo <sup>steamer</sup> from Porto Praya, Porto, Rio, do solemnly, sincerely, and truly <sup>that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, 1 in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act of February 5, 1917, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.</sup>

E. Ginnes  
Officer.

Sworn to before me this 17 day of April, 1918  
at Philadelphia, Pa.

Wm. L. Smith  
Immigration Officer.

15-470

## INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (Head-tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, house painter, steel polisher, iron molder, wood turner, etc., and not simply as engineer, painter, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language (or, if exemption is claimed, upon what ground)?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races pointed on back of this sheet. The entry should show the race or people assigned in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks to this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN.

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN.

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN.

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK).

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH).

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH).

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Columns 11 to 14.—These questions are self-explanatory.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country and city or town of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name and address of such relative. If no such relative having same name and address of friend.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$50, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when and where).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia.

Column 23 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

Column 27 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 28 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 29 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 30 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 31 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 32 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 33 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 34 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 35 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 36 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 37 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 38 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 39 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 40 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 41 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 42 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 43 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 44 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.

Column 45 (Whether going to join relative or friend; and if so, what relative or friend).—The answer should show whether going to join either a relative or friend; and if so, what relative or friend, with name and complete address.



AFFIDAVIT OF SURGEON

I, John Pollard, M.B., Surgeon of the "Montreal City", employed by owner, do solemnly, sincerely, and truly declare that I have had nineteen years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of British Medical Council, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

John Pollard M.B.

Sworn to before me this 25th day of June, 1935

at Bristol, England



BRISTOL, ENGLAND  
JUN 28 1935

John F. Claffey  
JOHN F. CLAFFEY,  
VICE CONSUL OF THE UNITED STATES OF  
AMERICA AT BRISTOL, ENGLAND.  
(Signature and Title of Immigration Officer authorized to administer oaths)

Service No. 342  
Fee 2 equivalent to 1-80/100

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russians).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List 1

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United  
This (pink) sheet is for the listing of

3504

Br. S. S. MONTREAL CITY

Passengers sailing from BRITOL ENGLAND

27<sup>th</sup> JUNE, 1935

| 1           | 2                                                                     | 3            | 4          | 5    | 6    | 7   | 8                     | 9        | 10                                                           | 11                                                   | 12             | 13             | 14      | 15                                                                                                                                   |                                                |       |                                                                                                       |                          |                                                                   |
|-------------|-----------------------------------------------------------------------|--------------|------------|------|------|-----|-----------------------|----------|--------------------------------------------------------------|------------------------------------------------------|----------------|----------------|---------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |            | Age  |      | Sex | Calling or occupation | Able to— |                                                              | Nationality<br>(Country of which citizen or subject) | Race or people | Place of birth |         | Immigration Visa, Passport Visa, or Reentry Permit number<br>Prefix number with QIV, NOV, PV, or RP and give section of act involved | Issued                                         |       | Data concerning verifications of landings, etc.<br>(This column for use of Government officials only) | Last permanent residence |                                                                   |
|             |                                                                       | Family name  | Given name | Yrs. | Mos. |     |                       | Read     | Read what language (or if exemption claimed, on what ground) |                                                      |                | Write          | Country |                                                                                                                                      | City or town, State, Province or District      | Place |                                                                                                       | Date                     | Country                                                           |
| 1           | 250275                                                                | ROBBINS      | WILLIAM    | 25   | 1    | M   | STUDENT               | YES      | ENGLISH                                                      | YES                                                  | BRITISH        | ENGLISH        | CANADA  | CRANBROOK<br>BRITISH COLUMBIA                                                                                                        | CANADIAN CITIZEN<br>DOMICILED IN CANADA<br>215 |       |                                                                                                       |                          | Victoria British Columbia<br>in<br>ENGLAND LONDON<br>for 9 months |
| 2           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 3           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 4           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 5           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 6           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 7           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 8           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 9           |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 10          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 11          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 12          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 13          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 14          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 15          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 16          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 17          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 18          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 19          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 20          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 21          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 22          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 23          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 24          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 25          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 26          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 27          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 28          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 29          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |
| 30          |                                                                       |              |            |      |      |     |                       |          |                                                              |                                                      |                |                |         |                                                                                                                                      |                                                |       |                                                                                                       |                          |                                                                   |

Local agents:  
Texas, Transport & Terminal Co.,  
Bourse Building,  
Philadelphia

Total passengers . . . . .  
U. S. citizens . . . . .  
Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA July 21, 1935

| 16          | 17                                                                                                                                                         | 18                                                          | 19                                          | 20                        | 21                                                    | 22                                                                                            | 23                      | 24      | 25                                                                                                               | 26                                 | 27                                                                                                            | 28                   | 29                   | 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 31                            | 32                                        | 33                                       | 34                                                      | 35                                                         | 36                                        | 37       |        |                         |      |      |      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------|---------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------|---------|------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------|------------------------------------------|---------------------------------------------------------|------------------------------------------------------------|-------------------------------------------|----------|--------|-------------------------|------|------|------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br>(*Intended future permanent residence) |                                             | By whom was passage paid? | Whether in possession of \$50, and if less, how much? | Whether ever before in the United States, and if so, when and where?<br>(Last residence only) |                         |         | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States |                                                                                                               | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Whether excluded and deported | Whether received and deported at any time | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height                                                     |                                           | Color of |        | Marks of identification |      |      |      |
|             |                                                                                                                                                            | Foreign country via port of departure                       | In U. S. A., its territories or possessions |                           |                                                       | Yes or No                                                                                     | Year or period of years | Where?  |                                                                                                                  | Date of last departure             | Whether this should be the country whence he or she would return if he or she were to leave the United States |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         | Length of time since last departure from the United States | Whether also citizen of the United States | Feet     | Inches |                         | Hair | Eyes |      |
| 1           | MRS. T. E. WOOD                                                                                                                                            | Victoria                                                    | CANADA                                      | MYSELF                    | YES                                                   | TRAVELLING                                                                                    | TO                      | SEATTLE | NO                                                                                                               | NO                                 | 4                                                                                                             | NO                   | NO                   | NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | NO                            | NO                                        | NO                                       | NO                                                      | NO                                                         | NO                                        | 5        | 10     | FAIR                    | FAIR | BLUE | None |
| 2           | 1128 CALEDONIA AVENUE                                                                                                                                      | Niagara Falls                                               |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 3           | VICTORIA B C                                                                                                                                               |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 4           | CANADA                                                                                                                                                     |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 5           | Uncle George Robbins,                                                                                                                                      |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 6           | 1227 Bay St                                                                                                                                                |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 7           | Victoria, B C                                                                                                                                              |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 8           |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 9           |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 10          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 11          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 12          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 13          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 14          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 15          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 16          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 17          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 18          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 19          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 20          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 21          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 22          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 23          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 24          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 25          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 26          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 27          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 28          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 29          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |
| 30          |                                                                                                                                                            |                                                             |                                             |                           |                                                       |                                                                                               |                         |         |                                                                                                                  |                                    |                                                                                                               |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                           |                                          |                                                         |                                                            |                                           |          |        |                         |      |      |      |

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Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, H. J. White <sup>Master</sup>, of the Br. S/S Montreal City, from Bristol, Swansea & Torbay, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.



Sworn to before me this 22 day of July, 1935  
at Philadelphia  
George H. Marine  
Immigration Officer.

H. J. White  
Master, Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisory, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head-tax status*).—Stevedores lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (*Sex*).—The entry should be either M (male) or F (female).

Column 5 (*Married or single*).—The answer should be M (married), S (single), W (widowed), or D (divorced).

Column 6 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood molder, etc., and not simply as customer, peddler, molder, turner, or other indefinite descriptions.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Stevedores lines should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (*Time to read and write*).—This column is subdivided and contains the following questions: "Read what language for, if exemption is claimed, upon what ground?" In answering this question the language of dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Nationality*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (SOUTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Veneto, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (south)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Genoa, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (north)." The State, Province, or District of birth should be shown in addition to the city of birth.

Column 11 (*Place of birth*).—The State, Province, or District of birth should be shown in addition to the city of birth.

Column 12 (*Serial number of document presented*).—Prefix serial number of document with abbreviation "QIV," "QIV," "IV," or "IV," as appropriate, to designate whether it is Quota Immigrant Visa, Nonquota Immigrant Visa, Passport Visa, or Reciprocity Permit; and also give section of the Immigration Act of 1924 involved, as section 4 (a).

Column 13 (*Time to read and write*).—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Intention of staying, etc.*).—Stevedores lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last resort to which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence thereon. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that same-day correspondence correctly show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be "United States."

Column 17 (*Name and complete address of nearest relative or friend to whom alien came*).—The entry should give name, exact street address, and telephone address of such relative. If no such relative living in country where alien came, then name and address of relative or friend in country of which citizen or subject. If such country is other than that whence alien came, address should include street and number.

Column 18 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place, date of departure of intended future permanent residence, if within the United States; country, if outside the United States; and port of intended departure.

Column 19 (*Whether having a ticket to such final destination*).—The answer should be either Yes (check) or No (no check).

Column 20 (*By whom was passage paid*).—The entry should show, as far as possible, by whom passage was paid, i. e., self; husband, father, brother, or other relative; passed; steamship company, etc.

Column 21 (*Whether in possession of \$20, and if less, how much*).—The answer should give in each case (individual or family) the exact amount of money, in cash, money brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States and if so, when, where, and date of last departure*).—The entries should show whether or not (Yes or No) the United States before; and if so, the year (or period of years) and place, i. e., New York, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*).—The answer should show whether going to join either a relative or friend, with name and complete address, and if a relative, the exact relationship.

Columns 24 to 36.—These questions are self-explanatory and the answers to all others on the sheet are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and was read within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

via Charleston, S.C. 7/8/35

S.S. "CARRILLO"

sailing from

PORTO BARROS, GUATEMALA

NO. 214

1935

Arriving at Port of PHILADELPHIA, PENN

JULY 21, 1935

| No. on List                                         | NAME IN FULL | AGE          | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                          |
|-----------------------------------------------------|--------------|--------------|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| FAMILY NAME                                         | GIVEN NAME   | Yrs. Mos.    |     |                                                                                                                                    |                                                                                                        |                                                   |
| PASSENGERS EMBARKED AT NEW YORK, N.Y. JULY 8, 1935. |              |              |     |                                                                                                                                    |                                                                                                        |                                                   |
| 1                                                   | CALDERWOOD   | J. DIXON     | 33  | M S                                                                                                                                | Tyrone, Penn. January 4, 1902                                                                          | 945 West End Av, New York, N.Y.                   |
| 2                                                   | DOMINGUEZ    | ANITA M.     | 50  | F S                                                                                                                                | Philadelphia, Penn. March 25, 1885                                                                     | 6630 Lotus Rd, Philadelphia, Pa.                  |
| 3                                                   | ELLERY       | GERTRUDE     | 31  | F S                                                                                                                                | Massillon, Ohio. December 11, 1904                                                                     | 10532 Clifton Blvd, Cleveland, Ohio.              |
| 4                                                   | GRAY         | CHARLES E.   | 57  | M M                                                                                                                                | Wilmington, Del. October 2, 1877                                                                       | 304 Woodside Avenue, Wilmington, Del.             |
| 5                                                   | GRAY         | GRACE MC L.  | 38  | F M                                                                                                                                | Marksboro, N.J. November 1, 1896                                                                       | with Husband above.                               |
| 6                                                   | HISCOE       | A. WINTHROP  | 41  | M S                                                                                                                                | E. Orange, N.J. November 12, 1893                                                                      | 104 Richfield Cottage Apts., Upper Darby, Penn.   |
| 7                                                   | IMBER        | JOSEPH       | 44  | M M                                                                                                                                | Berks County, Pennsylvania, February 13, 1912.                                                         | 1229 Eckert Avenue, Reading, Penn.                |
| 8                                                   | IMBER        | ROSE H.      | 35  | F M                                                                                                                                | New York, N.Y. March 3, 1903                                                                           | with Husband above.                               |
| 9                                                   | KOHL         | DOROTHY      | 27  | F S                                                                                                                                | Philadelphia, Penn. June 20, 1908                                                                      | 251 South 18th Street, Philadelphia, Penn.        |
| 10                                                  | KOHL         | SARA         | 29  | F S                                                                                                                                | Philadelphia, Penn. April 18, 1906                                                                     | with Sister above.                                |
| 11                                                  | KOSLOW       | SADIE        | 27  | F S                                                                                                                                | Trenton, N.J. July 18, 1907                                                                            | 701 Beatty Street, Trenton, New Jersey.           |
| 12                                                  | MAHLA        | EDNA         | 27  | F S                                                                                                                                | Philadelphia, Penn. September 6, 1907                                                                  | 5425 Palethrope St. Philadelphia, Penn.           |
| 13                                                  | MC CANN      | MARIE A.     | 38  | F S                                                                                                                                | Baltimore, Md. November 20, 1896                                                                       | 4421 Norwood Rd., Baltimore, Maryland.            |
| 14                                                  | MILLER       | PARK HAYS    | 55  | M M                                                                                                                                | Alleghney, Penn. December 21, 1879                                                                     | 904 Lindale Avenue, Drexel Hill, Penn.            |
| 15                                                  | MILLER       | BESSIE C.    | 53  | F M                                                                                                                                | Pittsburgh, Penn. May 8, 1882                                                                          | with Husband above.                               |
| 16                                                  | MOORE        | DONALD S.    | 27  | M M                                                                                                                                | Plainfield, N.J. April 26, 1907                                                                        | 915 West 6th Street, Plainfield, N.J.             |
| 17                                                  | MOORE        | RUTH A.      | 26  | F M                                                                                                                                | New York, N.Y. November 19, 1908                                                                       | with Husband above.                               |
| 18                                                  | SCHLIFF      | EDITH W.     | 38  | F M                                                                                                                                | Philadelphia, Pa. November 18, 1896                                                                    | 3751 Pulaski Avenue, Philadelphia, Penn.          |
| 19                                                  | SCHLIFF      | CHARLES W.   | 17  | M S                                                                                                                                | Philadelphia, Penn. February 20, 1918                                                                  | with Mother above.                                |
| 20                                                  | SLENKER      | WINIFRED K.  | 58  | F S                                                                                                                                | East Liberty, Ohio. February 9, 1899                                                                   | 1644 Ansel Road, Cleveland, Ohio.                 |
| 21                                                  | SWARTZ       | EDWARD       | 35  | M M                                                                                                                                | Baltimore, Md. October 22, 1900                                                                        | 2703 Queen Anne Road, Baltimore, Md.              |
| 22                                                  | SWARTZ       | ELIZABETH M. | 30  | F M                                                                                                                                | Baltimore, Md. October 21, 1905                                                                        | with Husband above.                               |
| 23                                                  | VAN LEER     | LEILA        | 25  | F S                                                                                                                                | Washington, D.C. April 9, 1912                                                                         | 805 St. Paul Street, Baltimore, Md.               |
| 24                                                  | WYNNE        | HELEN        | 42  | F S                                                                                                                                | Philadelphia, Penn. January 29, 1893                                                                   | 5184 Media Street, Philadelphia, Penn.            |
| 25                                                  | CLARKE       | JOHN D.      | 46  | M S                                                                                                                                | Davenport, Iowa February 11, 1889                                                                      | 441 Island Avenue, McKees Rocks, Penn.            |
| 26                                                  | HUFFMAN      | JOHN L.      | 34  | M S                                                                                                                                | Bentleyville, Penn. November 27, 1900                                                                  | R.D. # 1, Bentleyville, Penn.                     |
| 27                                                  | JEKYLL       | ARTHUR B.    | 69  | M M                                                                                                                                | Ottawa, Ill. May 18, 1866.                                                                             | 30 Crary Avenue, Mount Vernon, N.Y.               |
| 28                                                  | JEKYLL       | GRACE B.     | 56  | F M                                                                                                                                | Ludington, Mich. May 23, 1879                                                                          | with Husband above.                               |
| 29                                                  | LUNDY        | THOMAS J.    | 36  | M M                                                                                                                                | Westfield, N.Y. January 7, 1899.                                                                       | Box # 266, Charleroi, Penn.                       |
| 30                                                  | MEARNS       | ANNE L.      | 49  | F W                                                                                                                                | Princeton, N.J. January 10, 1886                                                                       | Hotel Lincoln, 13th & Locust, Philadelphia, Penn. |

PASSENGERS EMBARKED AT PTO. BARRIOS, GUATEMALA, JULY 14, 1935.

30th S. Ship Passenger admitted  
Inspector  
U. S. IMMIGRATION INSPECTOR

- 17 -

920  
7-18-35

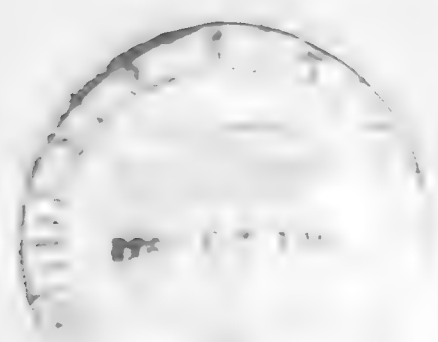
Line UNITED FRUIT

Owners UNITED FRUIT S.S. CORP.

Local Agents UNITED FRUIT COMPANY.

- IMPORTANT NOTICE.—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Nathan Hilfer, Surgeon of the S.S. Batien, sailing herewith, do solemnly, sincerely, and truly swear that I have had 1 years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of N.Y. State, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Nathan Hilfer M.D.

Sworn to before me this 22 day of July, 19 35 at Philadelphia, Pa.

Lee B. Dolch  
U. S. IMMIGRATION INSPECTOR

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzogovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



List 3

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

8505

Hand  
S. S.

GATUN

Passengers sailing from ALVARO OBREGON, MEXICO

JULY 17, 1935

| 1           | 2                                                                     | 3            | 4          | 5    | 6   | 7                 | 8                     | 9        | 10      | 11                                                    | 12               | 13                                                            | 14     | 15                       |            |      |                            |              |
|-------------|-----------------------------------------------------------------------|--------------|------------|------|-----|-------------------|-----------------------|----------|---------|-------------------------------------------------------|------------------|---------------------------------------------------------------|--------|--------------------------|------------|------|----------------------------|--------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |            | Age  | Sex | Married or single | Calling or occupation | Able to— |         | Nationality.<br>(Country of which citizen or subject) | † Race or people | Place of birth                                                |        | Immigration Visa Number  | Issued at— | Date | * Last permanent residence |              |
|             |                                                                       | Family name  | Given name | Yrs. |     |                   |                       | Mos.     | Read    |                                                       |                  | Read what language (or, if exemption claimed, on what ground) | Write  |                          |            |      | Country                    | City or town |
| 1           | 6191-2                                                                | IRWIN        | IRWIN V.   | 23   | 6   | M                 | SEAMAN                | YES      | ENGLISH | IRISH                                                 | ENGLISH          | St. Forrest                                                   | Canada | None required (No. 1213) |            |      |                            |              |
| 2           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 3           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 4           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 5           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 6           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 7           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 8           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 9           |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 10          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 11          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 12          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 13          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 14          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 15          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 16          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 17          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 18          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 19          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 20          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 21          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 22          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 23          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 24          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 25          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 26          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 27          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 28          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 29          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |
| 30          |                                                                       |              |            |      |     |                   |                       |          |         |                                                       |                  |                                                               |        |                          |            |      |                            |              |

Ad: In transit - 2 days - Canada via Buffalo, N.Y.

Lee D. Bolch -

U. S. IMMIGRANT INSPECTOR

3-4

Head In Bill # 283119

Dated July 25, 1935

M. J. H.

Ad: In transit - 2 days - Canada via Buffalo, N.Y.

Lee D. Solch

U. S. IMMIGRANT INSPECTOR

Headed in Bill #283119  
dated July 25, 1935  
M.D.

Total passengers . . . . . 40  
U. S. citizens . . . . . 39  
Aliens . . . . . 1

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

List 1.

The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of PHILADELPHIA, Pa., JULY 22, 1935

| 16          | 17                                                                                       | 18                                                          | 19                                                | 20                        | 21                                                    | 22                                                                   | 23                                                                                                                | 24                                 | 25                                                             | 26                                                              | 27                                                                        | 28                                                                        | 29                                                                        | 30                                                                        | 31                                                                        | 32                                                                        | 33                                                                        | 34                                                                        | 35                                                                        | 36                                                                        |      |
|-------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------|---------------------------|-------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came | Final destination<br>(*Intended future permanent residence) | Whether having a ticket to such final destination | By whom was passage paid? | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States; and if so, when and where? | Whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address | Purpose of coming to United States | Whether alien intends to become a citizen of the United States | Whether alien intends to become a resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States | Whether alien intends to become a permanent resident of the United States |      |
|             |                                                                                          | State                                                       | City or town                                      |                           |                                                       | Yes or No                                                            | Year or period of years                                                                                           | Where?                             |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           | Feet                                                                      | Inches                                                                    | Color of Hair                                                             | Color of Eyes                                                             |      |
| 1           | Father: A. J. Irvine<br>28 Moore Ave.,<br>Toronto, Ont. Can.                             | Toronto, Ontario                                            |                                                   | Self                      |                                                       | Yes                                                                  | 2 days                                                                                                            | U.S.A.                             | Passing through U.S.A. in order to take cruise.                | Yes                                                             | 2 days                                                                    | No                                                                        | No                                                                        | No                                                                        | No                                                                        | No                                                                        | Good                                                                      | No                                                                        | 5 10                                                                      | Fr. Br.                                                                   | Blue |
| 2           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    | Father: A. J. Irvine<br>28 Moore Ave.<br>Toronto, Ont. Canada  |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 3           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 4           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 5           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 6           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 7           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 8           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 9           |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 10          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 11          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 12          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 13          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 14          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 15          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 16          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 17          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 18          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 19          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 20          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 21          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 22          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 23          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 24          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 25          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 26          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 27          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 28          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 29          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 30          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 31          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 32          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 33          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 34          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 35          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |
| 36          |                                                                                          |                                                             |                                                   |                           |                                                       |                                                                      |                                                                                                                   |                                    |                                                                |                                                                 |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |                                                                           |      |

Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbelief in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

*H. B. Christiansen*  
I, *H. B. Christiansen*, of the *Hotel S/S Satingo*, from *Alvaro Obregón*, do solemnly, sincerely, and truly declare that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section three of the Immigration Act of February 5, 1917, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

*H. B. Christiansen*  
Master, Officer.

Sworn to before me this *22nd* day of *July*, 19 *35*  
at *Philadelphia, Pa.*

*Lee B. Doherty*  
Immigration Officer.

INSTRUCTIONS FOR FILLING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.

Column 2 (*Master's name*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.  
Column 4 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.  
Column 5 (*Sex*).—The entry should be either M (male) or F (female).  
Column 6 (*Married or single*).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).  
Column 7 (*Calling or occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example, Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc.; and not simply as engineer, polisher, molder, turner, or other indefinite designations.  
A listing non should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:  
A farmer is one who operates a farm, either for himself or for others.  
A farm laborer is one who works on a farm for the man who operates it.  
Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.  
Column 8 (*Able to read and write*).—The column is subdivided and contains the following question: "Read what language (or, if exception is claimed, upon what ground)." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.  
Column 9 (*Nativity*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.  
Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.  
Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully reviewed by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Italian alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN.

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN.

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN.

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK).

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH).

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Liguria, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH).

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Columns 11 to 14.—These questions are self-explanatory.  
Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country and city or town of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.  
Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*).—The entry should give name and address of such relative. If no such relative living, give name and address of friend.

Column 18 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States.

Column 19 (*If better having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (*Wishes to be accompanied by wife and family*).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be charged against the several members of the family.

Column 22 (*Wishes to be accompanied by wife and family*).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia.

Column 23 (*If better going to join relative or friend; and if so, what relative or friend*).—The answer should show whether going to join either a relative or friend, and if so, what relative or friend, with name and complete address.

Columns 24 to 35.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. If overruled in answering question 30, if alien has been deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

GOVERNMENT PRINTING OFFICE



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

**LIST OF UNITED STATES CITIZENS**  
(FOR THE IMMIGRATION AUTHORITIES)

"Mr." *S. S.* *GATTI* Sailing from *ALVARO OREGON, ILLINOIS*, JULY 17, 1935, Arriving at Port of *PHILADELPHIA*, JULY 22, 1935

| No. on List | NAME IN FULL |                | AGE       | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS. | ADDRESS IN UNITED STATES.             |
|-------------|--------------|----------------|-----------|-----|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------|
|             | FAMILY NAME  | GIVEN NAME     | Yrs. Mos. |     |                                                                                                                                     |                                                                                                         |                                       |
| 1           | REICHERT     | OTTO           | 27        | M   | NEW YORK CITY                                                                                                                       | Nov. 15, 1907.                                                                                          | 735 West 172nd. St., New York City    |
| 2           | SMITH        | WILLIAM F.     | 29        | M   | " " "                                                                                                                               | June 19, 1906                                                                                           | 454 Rikerside Drive New York City     |
| 3           | D'ANTONA     | RICHARD        | 22        | M   | Statenville, Ohio                                                                                                                   | July 24, 1912                                                                                           | 3301 N. Uber St., Phila., Pa.         |
| 4           | STEVENS      | EDWARD J.      | 37        | M   | BOSTON, Mass.                                                                                                                       | July 21, 1897                                                                                           | 336 Newbury St., Boston, Mass.        |
| 5           | MEADOWS      | MABEL MALE     | 43        | F   | CLEVELAND, OHIO                                                                                                                     | March 24, 1892                                                                                          | 1508 East 82nd. St., Cleveland, Ohio. |
| 6           | WITZ         | LILY RUTH      | 37        | F   | " "                                                                                                                                 | Feb. 21, 1898                                                                                           | 1608 East 82nd. St., Cleveland, Ohio. |
| 7           | SALMON       | IRENE F.       | 21        | F   | NEW YORK CITY                                                                                                                       | Aug. 6, 1913                                                                                            | 435 West 24th. St., New York City     |
| 8           | SALMON       | LILLIAN C.     | 23        | F   | " " "                                                                                                                               | Aug. 14, 1911                                                                                           | 435 West 24th. St., New York City     |
| 9           | MURPHY       | LILLIAN R.     | 42        | F   | Atlantic City, N. J.                                                                                                                | Dec. 4, 1893                                                                                            | 4800 Pine St., Phila., Pa.            |
| 10          | APPLE        | ALWOOD E.      | 34        | M   | PHILADELPHIA, Pa.                                                                                                                   | Feb. 23, 1901                                                                                           | 925 Alexander Ave., Drexel Hill, Pa.  |
| 11          | APPLE        | MARGUERITE E.  | 37        | F   | PHILADELPHIA                                                                                                                        | Nov. 20, 1897                                                                                           | Same as #10                           |
| 12          | DONOHUE      | THOMAS F.      | 33        | M   | UTICA, N.Y.                                                                                                                         | Nov. 20, 1901                                                                                           | 6622 Lebanon Ave., Phila., Pa.        |
| 13          | DONOHUE      | MARGIE E.      | 31        | F   | PHILADELPHIA, Pa.                                                                                                                   | May 1, 1904                                                                                             | Same as #12                           |
| 14          | MATHIE       | STUART B.      | 39        | M   | PHILADELPHIA                                                                                                                        | Aug. 19, 1895                                                                                           | 184 Glatfay Rd., Lansdowne, Pa.       |
| 15          | MATHIE       | BERTHA E.      | 38        | F   | TACOMA, WASH.                                                                                                                       | Jan. 11, 1897                                                                                           | Same as #14                           |
| 16          | FOUST        | LYNN E.        | 40        | F   | PHILADELPHIA                                                                                                                        | April 4, 1895                                                                                           | 1972 Sedary Ave., Phila., Pa.         |
| 17          | ALTOFF       | BERTHA E.      | 37        | F   | "                                                                                                                                   | Nov. 8, 1897                                                                                            | 1835 Church Lane, Phila., Pa.         |
| 18          | CROUCH       | THOMAS E.      | 31        | M   | "                                                                                                                                   | Feb. 21, 1904                                                                                           | 930 Atwood Rd. Phila., Pa.            |
| 19          | JONES        | LEILA W.       | 23        | F   | WILMINGTON, DEL.                                                                                                                    | Nov. 3, 1911                                                                                            | 1212 Del. Ave., Wilmington, Del.      |
| 20          | SILK         | DOROTHY        | 25        | F   | Brooklyn, N.Y.                                                                                                                      | Feb. 2, 1910                                                                                            | 209 East Ave. Jerkintown, Pa.         |
| 21          | ROCH         | FRED C.        | 33        | M   | PHILADELPHIA                                                                                                                        | Dec. 13, 1901                                                                                           | 3438 Aldine St., Phila., Pa.          |
| 22          | ROCH         | MARTHA J.      | 31        | F   | "                                                                                                                                   | Nov. 9, 1903                                                                                            | Same as #21                           |
| 23          | BARVER       | ELIZABETH      | 28        | F   | PITTSBURGH, PA.                                                                                                                     | Sept. 21, 1906                                                                                          | 3411 Parkview Ave., Pittsburgh, Pa.   |
| 24          | CAPLAN       | ELIAS W.       | 35        | M   | NEW YORK CITY                                                                                                                       | June 6, 1880                                                                                            | 253 Davis Ave., Inwood, L.I.C. N.Y.   |
| 25          | CAPLAN       | IDA E.         | 39        | F   | " " "                                                                                                                               | Aug. 14, 1895                                                                                           | Same as #24                           |
| 26          | STRATTON     | JOHN LAURENCE  | 32        | M   | BRIDGE, N.J.                                                                                                                        | Nov. 29, 1902                                                                                           | 1301 Weston Ave., Millington, N.J.    |
| 27          | WIDWELL      | WILLIAM EDWARD | 33        | M   | NEW YORK CITY                                                                                                                       | March 13, 1882                                                                                          | 2745 Locust Ave., New York City       |
| 28          | FOUSLE       | MARIE C.       | 29        | F   | PHILADELPHIA                                                                                                                        | July 12, 1906                                                                                           | 1205 East Fifth St., Phila., Pa.      |
| 29          | WOLFE        | ALICE E.       | 40        | F   | PHILADELPHIA                                                                                                                        | June 24, 1891                                                                                           | 222 West 14th St., Phila., Pa.        |
| 30          | WOLFE        | ALICE E.       | 40        | F   | "                                                                                                                                   | April 19, 1897                                                                                          | Same as #29                           |

*Lee B. Dolch*  
U. S. IMMIGRANT INSPECTOR

**IMPORTANT NOTICE.**—1. Great care should be taken not to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of all such members should be recorded upon the alien manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







(FOR THE IMMIGRATION AUTHORITIES)

[illegible]

- 20 -

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Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. *LeRoy* sailing from *Las Piedras Venezuela*, July 16th, 1935, Arriving at Port of *Philadelphia Pa* July 23rd, 1935.

| No.<br>ON<br>LIST | NAME IN FULL |            | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES                 |
|-------------------|--------------|------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 1                 | Hagben       | LeRoy, P.  | 43  | 1   | M                    | June 9th, 1892.<br>LaVergne, Ill. ✓                                                                                                      | no #50450 issued 11/4/32 - Renewed<br>Maracabo, Ven. 15 Nov 4, 9/35.                                          | 1626 Whitehall Bldg.<br>New York, N.Y. ✓ |
| 2                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 3                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 4                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 5                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 6                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 7                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 8                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 9                 |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 10                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 11                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 12                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 13                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 14                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 15                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 16                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 17                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 18                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 19                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 20                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 21                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 22                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 23                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 24                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 25                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 26                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 27                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 28                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 29                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |
| 30                |              |            |     |     |                      |                                                                                                                                          |                                                                                                               |                                          |

*One (1) U.S. Citizen admitted  
Samuel H. H. H.  
U.S. IMMIGRANT INSPECTOR*

*Frank McLean  
Master.*

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Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*S. S.* *COMAYAGUA* Sailing from *BARAGOA, CUBA*, July 19, 192*5*, Arriving at Port of *PHILADELPHIA, Pa.* July 25, 192*5*

| No.<br>Line | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES    |                                         |
|-------------|--------------|------------|-----|-----|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------|
|             | Family Name  | Given Name |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 1           | Kimball      | Helen A.   | 27  | 5   | F                                                                                                                                      | S                                                                                                           | Wayne, Maine, Jan. 27, 1908 | Deaconess Hospital, Brookline,<br>Mass. |
| 2           |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 3           |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 4           |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
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| 6           |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
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| 11          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 12          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 13          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 14          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
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| 16          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 17          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
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| 22          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 23          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 24          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 25          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 26          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 27          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 28          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 29          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |
| 30          |              |            |     |     |                                                                                                                                        |                                                                                                             |                             |                                         |

*See U.S. Citizen admitted  
Samuel Horowitz  
U. S. IMMIGRANT INSPECTOR*

*es Anderson  
Master*

*Handwritten signature*

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, Dr. W. Hanne, Surgeon of the S. S. Frankfurt, employed by owner, do solemnly, sincerely, and truly swear that I have had forty years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of the University of Bonn Germany, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

W. H. Hanne

Sworn to before me this 21st day of July, 19 25.



Cons. No. 2863  
Paid \$ 1.00 U.S. Cy.

W. H. Hanne  
Vice Consul of the United States of America

(Signature and title of immigration or other officer authorized to administer oaths)

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russiak).                          |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |







## List - 2 -

The entries on this sheet must be typewritten or printed.

July 26,

19 35

1 Carenger  
Carroll D. H.  
H. J. Ransom, H.A.S.  
U.S.P.H.S.

NOTE.—Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who believes in or is opposed to organized government, or who advocates the assassination of public officials or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with an organization entertaining and teaching disbeliefs in or opposition to organized government or who teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER



I, F. Muller, Master, of the Her. s/s Frankfurt, from Bremen, Germany do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, 1 in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

F. Muller,  
Officer.

Sworn to before me this 26<sup>th</sup> day of July, 1935  
at Philadelphia, Pa.

Lee B. Dolch  
Immigration Officer.

14-280

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head-tax status).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 4 (Age).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 5 (Sex).—The entry should be either M (male) or F (female).

Column 6 (Married or single).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (Calling or occupation).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example: Civil engineer, stationary engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (Able to read and write).—This column is subdivided and contains the following question: "Read what language [or, if exemption is claimed, upon what ground]." In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (Nationality).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (Race or people).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (Place of birth).—The State, Province, or District of birth should be shown in addition to the city or town.

Column 12 (Serial number of document presented).—Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Passport Visa, or Registry Permit; and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (Verifications of landing, etc.).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (Last permanent residence).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (Name and complete address of nearest relative or friend in country whence alien came).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (Final destination).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (Whether having a ticket to such final destination).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (By whom was passage paid).—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (Whether in possession of \$50, and if less, how much).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894-1897, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (Whether going to join relative or friend).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 30.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.

U. S. GOVERNMENT PRINTING OFFICE: 1934



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_ , and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

Note.—If a surgeon sails with the vessel, this affidavit, if made, shall be accepted as an immigration officer at port of arrival and any changes that may be required on arrival  
the condition of any of the aliens must be noted in the manifest and be forwarded with it to the nearest immigration office.  
If the surgeon sails with the vessel, the affidavit of verification shall be accepted at the port of departure and no further action shall be required.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                 |                   |                                                 |
|-----------------|-------------------|-------------------------------------------------|
| African, black. | Greek.            | Roumanian.                                      |
| Armenian.       | Hebrew.           | Russian.                                        |
| Bohemian.       | Herzegovinian.    | Ruthenian (Rusniak).                            |
| Bosnian.        | Irish.            | Scandinavian (Norwegian,<br>Danes, and Swedes). |
| Bulgarian.      | Italian (North).  | Scotch.                                         |
| Chinese.        | Italian (South).  | Servian.                                        |
| Croatian.       | Japanese.         | Slovak.                                         |
| Cuban.          | Korean.           | Slovenian.                                      |
| Dalmatian.      | Lithuanian.       | Spanish.                                        |
| Dutch.          | Magyar.           | Spanish American.                               |
| East Indian.    | Mexican.          | Syrian.                                         |
| English.        | Montenegrin.      | Turkish.                                        |
| Finnish.        | Moravian.         | Welsh.                                          |
| Flemish.        | Pacific Islander. | West Indian (other than<br>Cuban).              |
| French.         | Polish.           |                                                 |
| German.         | Portuguese.       |                                                 |





ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This pink sheet is for the listing of

3807

Der m...

S.S. Max Albrecht

## Passengers sailing from

Hamburg, Germany  
(via Montreal, Canada)

July 2

. 1935

|                            |       |
|----------------------------|-------|
| Total passengers . . . . . | _____ |
| U. S. citizens . . . . .   | _____ |
| Aliens . . . . .           | _____ |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of races will be found on the back of this sheet.



## List

The entries on this sheet must be typewritten or printed.

Arriving at Port of Philadelphia, July 27, 1935

NOTE: Full text of question 29 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of a affiliated with any organization or teaching disbelieved in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assault or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, \_\_\_\_\_, of the \_\_\_\_\_, from \_\_\_\_\_, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Officer.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_ at \_\_\_\_\_

Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose Visas bear the initials of Technical Advisors, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (*Head-tax status*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 3 (*Age*).—The answer in this column should be expressed in years or months, the latter applying only to those under 1 year of age.

Column 4 (*Sex*).—The entry should be either M (male) or F (female).  
Column 5 (*Married single*).—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

Column 7 (*Occupation*).—The entry should describe as accurately as possible the occupation, trade, or profession of each alien, as, for example: "field engineer," "stationery engineer," "boiler-maker," "marine engineer," "house painter," "steel polisher," "iron mender," "wood turner," etc., and not simply "engineer," "painter," "mender," or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm, either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

Column 8 (*Ability to read and write*).—This column is subdivided and contains the following question: "Read what language for, if exemption is claimed, upon what ground." In answering this question, the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

Column 9 (*Voluntary*).—Question 9 should be construed to mean the country of which alien is a citizen or subject.

Column 10 (*Race or people*).—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully reviewed by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people, and "Hebrew" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of Russian, Swiss, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than either Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to that portion of Italy north of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Emilia) and their descendants, whether residing in Italy, Switzerland, Austria, or any other country, should be classed as "Italian (north)." Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

Column 11 (*Place of birth*).—The state, Province, or District of birth should be shown in addition to the city or town.

Column 12 (*Serial number of document presented*).—Produce serial number of document with observation "IV," "XIV," "I," or "II," as appropriate, to designate whether it is Quota Immigration Visa, Nonquota Immigration Visa, Transit Visa, or Reciprocity Permit; and also state section of the Immigration Act of 1924 involved, as Section 1 (a).

Column 13.—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

Column 14 (*Occupations of husband, etc.*).—Steamship lines should make no entries in this column. The space is for use of Government officials only.

Column 15 (*Last permanent residence*).—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence. The serial number of last permanent residence. The serial number in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

Column 17 (*Name and complete address of nearest relative or friend in country whence alien came*).—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject, if such country is other than that whence alien came. Address should include street and number.

Column 18 (*Final destination*).—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) of intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

Column 19 (*Whether having a ticket to such final destination*).—The answer should be either Yes (ticket) or No (no ticket).

Column 20 (*By whom was passage paid*).—The entry should show definitely by whom passage was paid, as self; husband, father, brother, or other relative; friend; steamship company, etc.

Column 21 (*Whether in possession of \$10, and if less, how much*).—The answer should give in each case (individual or family) the exact amount of money shown. Money brought by the head of a family should not be divided among the several members of the family.

Column 22 (*Whether ever before in the United States; and if so, when, where, and date of last departure*).—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as, 1894, 1897, Philadelphia. Where in the United States more than once previously, indicate last residence only, and give exact or approximate date of last departure from the United States.

Column 23 (*Whether going to join relative or friend*).—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

Columns 24 to 26.—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 26, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number **1**

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Am.* S. S. "TIVIVES" sailing from PTO. BARRIOS, GUATEMALA, JULY 21st, 1935, Arriving at Port of PHILADELPHIA, PA. VIA CHARLESTON, S.C. JULY 28th, 1935.

| No.<br>on<br>List                                                               | NAME IN FULL |            | AGE       | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                            |
|---------------------------------------------------------------------------------|--------------|------------|-----------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
|                                                                                 | FAMILY NAME  | GIVEN NAME | Yrs. Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                                     |
| PASSENGERS EMBARKED AT PHILADELPHIA, PA. - JULY 15th, 1935.                     |              |            |           |     |                      |                                                                                                                                          |                                                                                                              |                                                     |
| 1                                                                               | Ayres        | Arintia    | ✓ 55      | F   | S                    | November 9, 1879. - Pittsburgh, Pa.                                                                                                      | ✓                                                                                                            | 551 Paulson Ave., Pittsburgh, Pa. <i>Chas</i>       |
| 2                                                                               | Ayres        | Eva        | ✓ 45      | F   | S                    | January 29, 1890. - Salem, N.J.                                                                                                          | ✓                                                                                                            | 521 Ivy St., Pittsburgh, Pa.                        |
| 8                                                                               | Bair         | Kenneth H. | ✓ 45      | M   | M                    | June 25, 1889. - Greensburg, Pa.                                                                                                         | ✓                                                                                                            | 353 N. Main St., Greensburg, Pa.                    |
| 4                                                                               | Bair         | Willette   | ✓ 36      | F   | M                    | February 3, 1899. - Phoenix, Arizona                                                                                                     | ✓                                                                                                            | do. do.                                             |
| 5                                                                               | Baker        | Augustus   | ✓ 66      | M   | W                    | March 22, 1869. - Pittsburgh, Pa.                                                                                                        | ✓                                                                                                            | 940 Heberton St., Pittsburgh, Pa.                   |
| 6                                                                               | Coulter      | John H.    | ✓ 28      | M   | M                    | March 5, 1907. - Greensburg, Pa.                                                                                                         | ✓                                                                                                            | Harrison City Rd., Greensburg, Pa.                  |
| 7                                                                               | Coulter      | Lucia M.   | ✓ 26      | F   | M                    | May 26, 1909. - Brooklyn, N.Y.                                                                                                           | ✓                                                                                                            | do. do.                                             |
| 8                                                                               | Dickinson    | Kathryn    | ✓ 26      | F   | S                    | November 24, 1908. - Easton, Pa.                                                                                                         | ✓                                                                                                            | 2100 So. College Ave., Philadelphia, Pa.            |
| 9                                                                               | Duncan       | Preston    | ✓ 27      | M   | S                    | March 1, 1908. - Trenton, N.J.                                                                                                           | ✓                                                                                                            | 38 Bryn Mowr Ave., Trenton, N.J.                    |
| 10                                                                              | Fenton       | Edith      | ✓ 50      | F   | S                    | September 14, 1885. - Hollicong, Pa.                                                                                                     | ✓                                                                                                            | 2723 Somerset St., Philadelphia, Pa.                |
| 11                                                                              | Frank        | Mae        | ✓ 25      | F   | S                    | <i>not Phila (father's name)</i><br>By father's papers (June 2, 1908, Parkside)                                                          |                                                                                                              | 4108 Parkside Ave., Philadelphia, Pa.               |
| 12                                                                              | Girton       | Gladys     | ✓ 34      | F   | S                    | April 22, 1901. - Millville, Pa.                                                                                                         | ✓                                                                                                            | Wayne, Pa.                                          |
| 13                                                                              | Howson       | Elizabeth  | ✓ 23      | F   | S                    | April 27, 1912. - Wayne, Pa.                                                                                                             | ✓                                                                                                            | 134 Walnut Ave., Wayne, Pa.                         |
| 14                                                                              | Kenin        | Rose       | ✓ 44      | F   | S                    | September 30, 1890. - Bridgeton, N.J.                                                                                                    | ✓                                                                                                            | 135 S. 56th St., Philadelphia, Pa.                  |
| 15                                                                              | Krohn        | Mary       | ✓ 29      | F   | S                    | November 16, 1905. - New Brunswick, N.J.                                                                                                 | ✓                                                                                                            | 36 Abeel St., New Brunswick, N.J.                   |
| 16                                                                              | Krohn        | Elizabeth  | ✓ 27      | F   | S                    | July 22, 1907. - New Brunswick, N.J.                                                                                                     | ✓                                                                                                            | do. do.                                             |
| 17                                                                              | Leech        | Francis    | ✓ 36      | M   | S                    | August 1, 1899. - Washington, D.C.                                                                                                       | ✓                                                                                                            | 1359 Columbia Rd., Washington, D.C.                 |
| 18                                                                              | Lischer      | Carl W.    | ✓ 43      | M   | M                    | August 8, 1891. - Trenton, N.J.                                                                                                          | ✓                                                                                                            | 50 Bryn Mowr Ave., Trenton, N.J.                    |
| 19                                                                              | Lischer      | Doris      | ✓ 16      | F   | S                    | August 1, 1918. - Trenton, N.J.                                                                                                          | ✓                                                                                                            | do. do.                                             |
| 20                                                                              | Plone        | Albert K.  | ✓ 25      | M   | M                    | December 7, 1909. - Philadelphia, Pa.                                                                                                    | ✓                                                                                                            | 1125 Magnolia Ave., Camden, N.J.                    |
| 21                                                                              | Plone        | Miriam M.  | ✓ 18      | F   | M                    | April 5, 1917. - Philadelphia, Pa.                                                                                                       | ✓                                                                                                            | do. do.                                             |
| 22                                                                              | Pugh         | Nena C.    | ✓ 31      | F   | S                    | October 17, 1903. - Norristown, Pa.                                                                                                      | ✓                                                                                                            | 821 W. Oak St., Norristown, Pa.                     |
| 23                                                                              | Shingle      | Evelyn     | ✓ 20      | F   | S                    | October 18, 1905. - Honeybrook, Pa.                                                                                                      | ✓                                                                                                            | Honeybrook, Pa.                                     |
| 24                                                                              | Tarrant      | James W.   | ✓ 32      | M   | S                    | April 24, 1903. - Lynchburg, S.C.                                                                                                        | ✓                                                                                                            | 4926 Locust St., Philadelphia, Pa.                  |
| 25                                                                              | Teller       | Walter C.  | ✓ 35      | M   | S                    | January 31st, 1933.<br>U.S. District Court Philadelphia, Pa. /                                                                           |                                                                                                              | Philadelphia, Pa.<br>Aldine Apts. 1327 Spruce St. / |
| 26                                                                              | Thompson     | Kemble     | ✓ 35      | M   | S                    | July 30, 1899. - Brooklyn, N.Y.                                                                                                          | ✓                                                                                                            | 1421 Arch St., Philadelphia, Pa.                    |
| 27                                                                              | Wilson       | Mary       | ✓ 55      | F   | M                    | April 1, 1877. - Philadelphia, Pa.                                                                                                       | ✓                                                                                                            | 7520 Ridge Ave., Philadelphia, Pa.                  |
| 28                                                                              | Wilson       | Marion     | ✓ 28      | F   | S                    | December 25, 1906. - Philadelphia, Pa.                                                                                                   | ✓                                                                                                            | do. do.                                             |
| PASSENGERS EMBARKED AT PTO. BARRIOS, GUATEMALA - JULY 21, 1935.                 |              |            |           |     |                      |                                                                                                                                          |                                                                                                              |                                                     |
| 29                                                                              | Calder, Jr.  | Philip R.  | ✓ 17      | M   | S                    | April 20, 1918. - Melrose, Mass.                                                                                                         | ✓                                                                                                            | 38 Wentworth Rd., Melrose, Mass.                    |
| 30                                                                              | Hodgson      | Daniel B.  | ✓ 73      | M   | M                    | June 23, 1862. - Brooklyn, N.Y.                                                                                                          | ✓                                                                                                            | Old Lyme, Conn.                                     |
| All admitted + Philadelphia July 28, 1935 - #1 to #28 are round trip passengers |              |            |           |     |                      |                                                                                                                                          |                                                                                                              |                                                     |

*All admitted + Philadelphia July 28, 1935 - #1 to #28 are round trip passengers*

*George A. Marine  
Immigrant Inspector*

- 25 -

Line United Fruit Co.,  
Owners United Fruit S.S. Corp.,  
Local Agents United Fruit Co.

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number **2.**

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Am.* S. S. **"TIVIVES"** sailing from **PTO. BARRIOS, GUATEMALA**, **JULY 21st, 1935**, Arriving at Port of **PHILADELPHIA, PA.** **VIA CHARLESTON, S.C.** **JULY 28th, 1935.**

| No.<br>ON<br>LIST | NAME IN FULL                                                                    |            | AGE  |      | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES           |
|-------------------|---------------------------------------------------------------------------------|------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------|
|                   | FAMILY NAME                                                                     | GIVEN NAME | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 1                 | Hodgsdon                                                                        | Donald B.  | ✓ 25 |      | M   | S                    | August 12th, 1909. - Guatemala City                                                                                                      | ✓ Of American parents                                                                                        | ✓ Old Lyme, Conn.                  |
| 2                 | Unruh                                                                           | Edith W.   | ✓ 38 |      | F   | S                    | January 28th, 1897. - Philadelphia, Pa.                                                                                                  |                                                                                                              | 330 School Lane, Philadelphia, Pa. |
| 3                 | <p><i>Admitted at Philadelphia July 28, 1935</i><br/><i>George H. Maime</i></p> |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 4                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 5                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 6                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 7                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 8                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 9                 |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 10                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 11                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 12                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 13                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 14                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 15                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 16                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 17                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 18                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 19                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 20                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 21                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 22                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 23                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 24                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 25                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 26                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 27                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 28                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 29                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |
| 30                |                                                                                 |            |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                    |

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Line United Fruit Co.,  
Owners United Fruit S.S. Corp.,  
Local Agents United Fruit Co.

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "SARATOGA" Sailing from ALBANY, OHIO, JULY 23RD, 1936, Arriving at Port of PHILADELPHIA, PA. JULY 26TH, 1936

| No. on List | NAME IN FULL |              | AGE       | SEX | Married or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH, CITY OR TOWN AND STATE. | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS. | RESIDENCE IN UNITED STATES                     |
|-------------|--------------|--------------|-----------|-----|-------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------------------------|
|             | FAMILY NAME  | GIVEN NAME   | Yrs. Mos. |     |                   |                                                                                                                                    |                                                                                                        |                                                |
| 1           | Brookshire   | Russell      | ✓ 26      | M   | S                 | Jan. 1st, 1914. Kansas City, Mo.                                                                                                   |                                                                                                        | University of Virginia<br>Charlottesville, Va. |
| 2           | Delesterrier | J. Bryce     | ✓ 20      | M   | S                 | May 2nd, 1915. New York, N. Y.                                                                                                     |                                                                                                        | 135 East 87th St.,<br>New York City.           |
| 3           | Williams     | Mrs. William | ✓ 41      | F   |                   | Feb. 2nd, 1895. Pittsburgh, Pa.                                                                                                    |                                                                                                        | 2004 Avenue P.,<br>Washington, D. C.           |
| 4           | Smith        | Alma         | ✓ 24      | F   | S                 | Jan. 2nd, 1912. Philadelphia, Pa.                                                                                                  |                                                                                                        | 1002 E. 11th St.,<br>Philadelphia, Pa.         |
| 5           | Kellfeller   | Marie        | ✓ 19      | F   | S                 | Jan. 1st, 1916. Philadelphia, Pa.                                                                                                  |                                                                                                        | 6402 Norwood St.,<br>Philadelphia, Pa.         |
| 6           | Wite         | Marjorie L.  | ✓ 21      | F   | S                 | June 11th, 1915. Philadelphia, Pa.                                                                                                 |                                                                                                        | 400 West 11th St.,<br>Philadelphia, Pa.        |
| 7           | Wendrickson  | Edw. J.      | ✓ 41      | M   | S                 | June 2nd, 1894. Boston, U. S.                                                                                                      |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 8           | Wendrickson  | Edw. J.      | ✓ 41      | M   | S                 | Sept. 1st, 1894. Lancaster, Pa.                                                                                                    |                                                                                                        | 900 Barclay St.,<br>New York City.             |
| 9           | Ordner       | Mrs. Bertha  | ✓ 40      | F   | S                 | Apr. 2nd, 1897. Baltimore, Md.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 10          | Vines        | Mrs. Nellie  | ✓ 40      | F   | S                 | Jan. 2nd, 1896. Baltimore, Md.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 11          | Hilber       | Alma         | ✓ 20      | F   | S                 | Jan. 1st, 1916. Philadelphia, Pa.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 12          | Patterson    | Bertha       | ✓ 40      | F   | S                 | Jan. 1st, 1896. Philadelphia, Pa.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 13          | Dean         | Betty        | ✓ 21      | F   | S                 | July 2nd, 1915. Philadelphia, Pa.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 14          | Wendrickson  | Miss J. B.   | ✓ 30      | F   | S                 | July 2nd, 1906. Philadelphia, Pa.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 15          | Labella      | Olivia       | ✓ 40      | F   | S                 | May 1st, 1896. Brooklyn, N. Y.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 16          | Dayton       | Bertha       | ✓ 27      | F   | S                 | June 1st, 1909. Brooklyn, N. Y.                                                                                                    |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 17          | Quay         | Anna         | ✓ 32      | F   | S                 | June 1st, 1904. Philadelphia, Pa.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 18          | Donnelly     | Marjorie L.  | ✓ 21      | F   | S                 | Jan. 2nd, 1915. New York City.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 19          | Grisham      | John         | ✓ 40      | M   | S                 | Jan. 4th, 1907. Brooklyn, N. Y.                                                                                                    |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 20          | Wendrickson  | Miss S.      | ✓ 40      | F   | S                 | Oct 1st, 1896. Brooklyn, N. Y.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 21          | Wendrickson  | Marjorie L.  | ✓ 40      | F   | S                 |                                                                                                                                    | Supreme Court New York City, October 1935                                                              | 100 West 11th St.,<br>New York City.           |
| 22          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Apr 9th, 1899. Philadelphia, Pa.                                                                                                   |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 23          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Apr 23, 1902. Philadelphia, Pa.                                                                                                    |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 24          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Sept 1st, 1906. Allentown, Pa.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 25          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Mar 2nd, 1908. Springfield, Mass.                                                                                                  |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 26          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | July 2nd, 1904. Brooklyn, N. Y.                                                                                                    |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 27          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Mar 2nd, 1904. New York, N. Y.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 28          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | Feb 7th, 1910. Brooklyn, N. Y.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 29          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | June 1st, 1912. Passaic, N. J.                                                                                                     |                                                                                                        | 100 West 11th St.,<br>New York City.           |
| 30          | Wendrickson  | Marjorie L.  | ✓ 37      | F   | S                 | May 1st, 1910. New York City, N. Y.                                                                                                |                                                                                                        | 100 West 11th St.,<br>New York City.           |

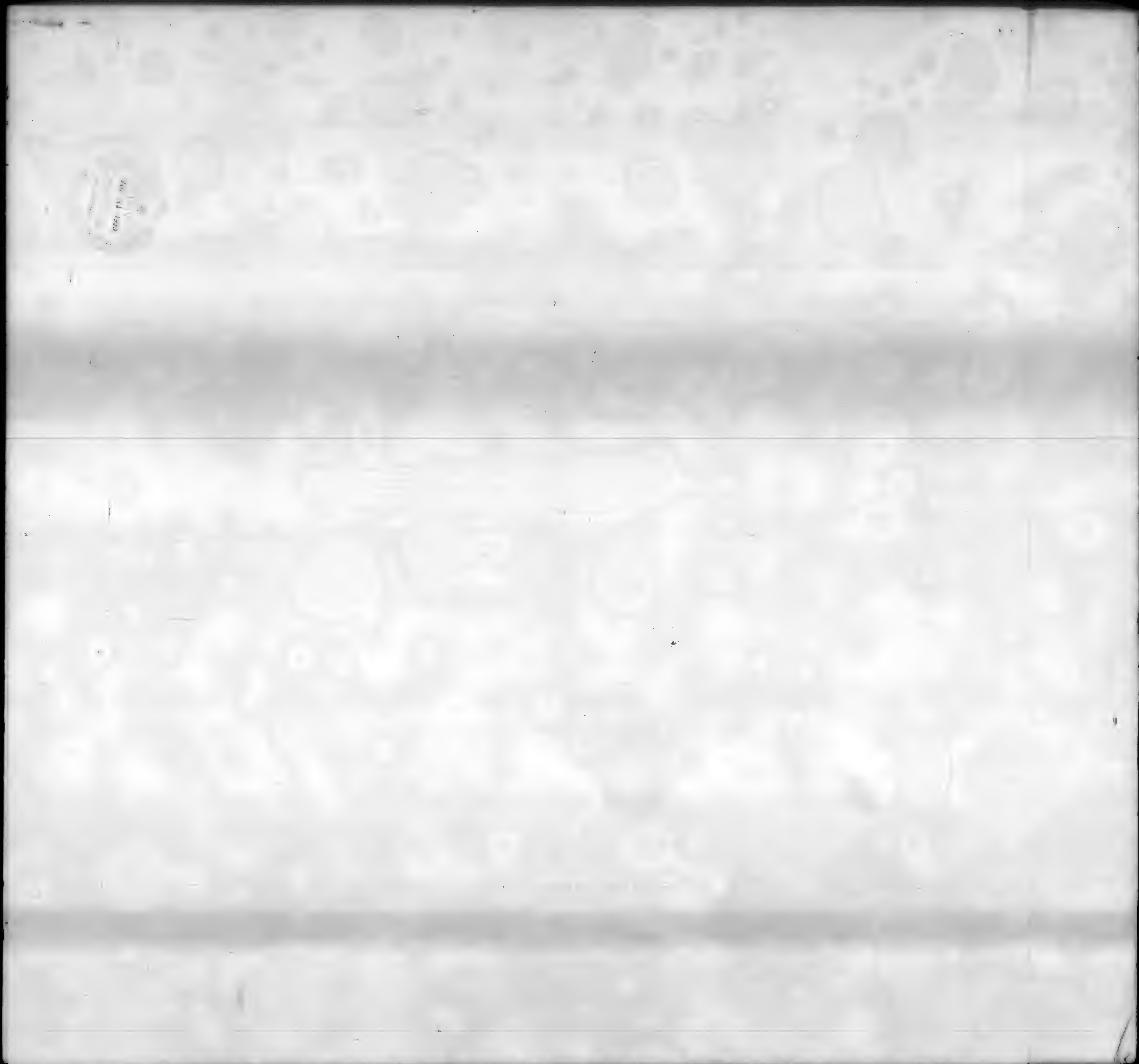
All passengers admitted at Philadelphia July 27, 1936

- 27 -

Chas. S. Hill  
Director

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2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. *Albatross* Sailing from *Albatross* , 19 *19* , Arriving at Port of *Philadelphia, Pa.,* 19 *19*

| No.<br>of<br>List | NAME IN FULL                                                   |                   | AGE  |     | SEX | MARRIED<br>OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF FOREIGN COUNTRY GIVE WITH DATE<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND DATE OF NATURALIZATION<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND EXPIRATION DATE | ADDRESS IN FULL                 |
|-------------------|----------------------------------------------------------------|-------------------|------|-----|-----|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------|
|                   | FAMILY NAME                                                    | GIVEN NAME        | Yrs  | Mos |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 31                | Valley                                                         | Marjorie Campbell | ✓ 31 |     | F   | 3                       | July 14th 1894                                                                                                                           | Franklin, Mass.                                                                                                   | Franklin St., Quincy, Mass.     |
| 32                | Mc Elroy                                                       | Mary E.           | ✓ 17 |     | F   | 3                       | July 1st 1894                                                                                                                            | Quincy, Mass.                                                                                                     | 48 Dexter St., Boston, Mass.    |
| 33                | Wheeler                                                        | Carl L.           | ✓ 14 |     | M   | 3                       | Dec 2nd 1911                                                                                                                             | Quincy, Mass.                                                                                                     | 100 Erie St., Philadelphia, Pa. |
| 34                | Wheeler                                                        | Edward            | ✓ 12 |     | M   | 3                       | Feb 21st 1900                                                                                                                            | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 35                | Wheeler                                                        | Anna              | ✓ 10 |     | F   | 3                       | January 12th 1901                                                                                                                        | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 36                | Wheeler                                                        | John E.           | ✓ 10 |     | M   | 3                       | April 17th 1901                                                                                                                          | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 37                | Wheeler                                                        | Mrs. M. J.        | ✓ 13 |     | F   | 3                       | April 27th 1900                                                                                                                          | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 38                | Wheeler                                                        | James E.          | ✓ 11 |     | M   | 3                       | June 12th 1901                                                                                                                           | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 39                | Wheeler                                                        | John              | ✓ 17 |     | M   | 3                       | Aug 14th 1897                                                                                                                            | Franklin, Mass.                                                                                                   | 100 Erie St., Philadelphia, Pa. |
| 40                | <i>All named passengers, admitted to U.S. on July 24, 1915</i> |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 41                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 42                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 43                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 44                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 45                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 46                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 47                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 48                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 49                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 50                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 51                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 52                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 53                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 54                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 55                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 56                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 57                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 58                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 59                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 60                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 61                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 62                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 63                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 64                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 65                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 66                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 67                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 68                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 69                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 70                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 71                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 72                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 73                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 74                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 75                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 76                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 77                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 78                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 79                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 80                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 81                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 82                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 83                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 84                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 85                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 86                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 87                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 88                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 89                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 90                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 91                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 92                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 93                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 94                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 95                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 96                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 97                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 98                | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 99                |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 100               | <i>Not a passenger</i>                                         |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |
| 101               |                                                                |                   |      |     |     |                         |                                                                                                                                          |                                                                                                                   |                                 |

*Louis R. Haas*  
SHIP MASTER

*Chas. S. Hill*  
CAPTAIN

- 28 -

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon each manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



1000 1000



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

Signature and date of commission of the Surgeon (to be filled in by the Surgeon)

NOTE.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the alien is reexported.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some other authorized immigration officer.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens spring and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Romanian.                                     |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Rusyn).                            |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This pink sheet is for the listing of

358

Amer- S. S. Eagle

## Passengers sailing from Aruba

, July 27, 1935

|                            |       |
|----------------------------|-------|
| Total passengers . . . . . | _____ |
| U. S. citizens . . . . .   | _____ |
| Aliens . . . . .           | _____ |

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.  
† List of faces will be found on the back of this sheet.



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of Philadelphia, Pa.

July 31,

1935.

List

The entries on this sheet must be typewritten or printed.

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br>(Indicate State, Territory, Possession, or Country) | By whom was passage paid? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character. | Condition of health, mental and physical | Deformed or crippled. Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of<br>Hair<br>Eyes | Marks of identification               |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|--------------------------|---------------------------------------|
| 1           | Mrs. Manuela Franco Icaza<br>Harcia, Coruna, Sada, Spain                                                                                                   | N.Y. New York                                                            | self                      | Yes<br>23                                                            | Cousin Juan Priego<br>#1 Chambers Slip -<br>New York - N.Y.                                                      | no                                 | no                   | no                   | no                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | good                                     | no                                                      | 5' 6"                    | dk brn                   | Black spot on forehead over right eye |
| 2           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 3           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 4           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 5           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 6           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 7           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 8           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 9           |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 10          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 11          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 12          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 13          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 14          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 15          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 16          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 17          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 18          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 19          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 20          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 21          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 22          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 23          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 24          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 25          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 26          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 27          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 28          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 29          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |
| 30          |                                                                                                                                                            |                                                                          |                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         |                          |                          |                                       |

Note: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who disbelieves in or is opposed to organized government, or who advocates the assassination of public officials or who advocates or teaches the unlawful destruction of property, or is a member of or affiliated with any organization entertaining and teaching disbeliefs in or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the duty, necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, E. V. Farrow <sup>Master</sup>, of the Amer. S. Eagle, from Aruba, D. W. I., do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Officer.

Sworn to before me this 31<sup>st</sup> day of July, 1935  
at Philadelphia, Pa.  
Lee B. Boldt  
Immigration Officer.

14-430

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants, as defined by the Immigration Act of 1921; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical A, B, C, D, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

Column 2 (Head tax status).—Shipments from the United States should be entered in this column. The space is for use of Government officials only.  
Column 4 (Class).—The manner in which passengers should be expressed in years or months, the latter applied only to those who are 1 year of age or over.  
Column 5 (Color).—The color should be entered in white, or if of other color, in brown, or if of other color, in black.  
Column 6 (Married or single).—The answer should be "M" (married) or "S" (single).  
Column 7 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.  
A distinction should be made between "born in" and "born of" in the case of the children of alien parents.  
A distinction should be made between "born in" and "born of" in the case of the children of alien parents.  
A distinction should be made between "born in" and "born of" in the case of the children of alien parents.

Column 8 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.  
Column 9 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.  
Column 10 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.  
Column 11 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

### ITALIAN (South)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Lombardy, Liguria, the Marches, Umbria, Rome, the Abruzzi, and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be entered as "Italian (South)."

Column 12 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 13 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 14 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 15 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 16 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 17 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 18 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 19 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 20 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 21 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 22 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 23 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 24 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 25 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 26 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 27 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 28 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 29 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 30 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 31 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 32 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 33 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 34 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 35 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 36 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.

Column 37 (Country of birth).—The entry should be made in the country of birth, or if born in the United States, in the name of the father, or if born in the United States, in the name of the mother, or if born in the United States, in the name of the father and mother.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Year \_\_\_\_\_

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Am* S. S. *Wilfman* sailing from *Las Piedras, Venezuela* July 24, 1935, Arriving at Port of *July 31, 1935*, 19\_\_

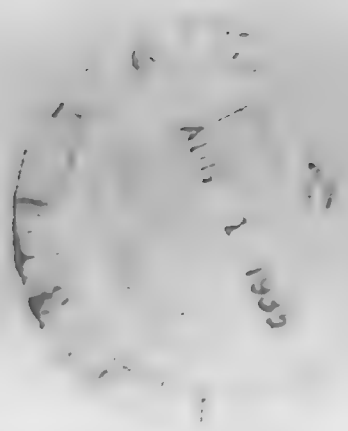
| No. | NAME IN FULL                           | AGE      | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ARRIVAL AT PORT OF ENTRY                                                                                                                                                        |
|-----|----------------------------------------|----------|-----|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1   | HEATH                                  | PAUL     | 24  | M                                                                                                                                | May 4, 1896<br>Birmingham, Alabama                                                                    | U.S. passport # 152 iss. New Consulate<br>Tampere, Mex. expired 2/1/35<br>U.S. passport # 573644 iss. Wash. D.C.<br>1/24/33<br>U.S. passport # 134064 iss. Wash. D.C.<br>5/9/35 |
| 2   | IVIE                                   | CLYDE    | 24  | M                                                                                                                                | Oct 30, 1905<br>Ritchie, Texas                                                                        | Italy, 1-2-35<br>Self Declaration in<br>Houston, Texas<br>1931 Self Decl. Wash.<br>Birmingham, Alabama                                                                          |
| 3   | HEATH                                  | EDWARD A | 46  | M                                                                                                                                | Jan 4, 1889<br>Birmingham, Alabama                                                                    |                                                                                                                                                                                 |
| 4   | Admitted at Philadelphia July 31, 1935 |          |     |                                                                                                                                  |                                                                                                       |                                                                                                                                                                                 |
| 5   | George A. Marine                       |          |     |                                                                                                                                  |                                                                                                       |                                                                                                                                                                                 |
| 6   | Immigrant Inspector                    |          |     |                                                                                                                                  |                                                                                                       |                                                                                                                                                                                 |
| 7   |                                        |          |     |                                                                                                                                  |                                                                                                       |                                                                                                                                                                                 |
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*W. L. Lane*  
*Master*

-30-

- IMPORTANT NOTICE.
1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.
  2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.
  3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.
  4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. \_\_\_\_\_ Sailing from \_\_\_\_\_, 19\_\_\_\_, Arriving at Port of \_\_\_\_\_, 19\_\_\_\_

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                         |                                                                                                             |                          |
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-31-

**IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. *Himmelman* sailing from *Matanzas, Cuba*, July 27, 1935 Arriving at Port of *Philadelphia* August 2, 1935

| No.<br>of<br>List | NAME IN FULL |                                                                              | AGE       | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-------------------|--------------|------------------------------------------------------------------------------|-----------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME                                                                   | Yrs. Mos. |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 1                 | KOLWEY       | Norman George                                                                | 36        | m   |                      | born St. Charles, Missouri<br>May 17, 1899                                                                                               | June 22, 1935, registered in Philadelphia, Pa.<br>St. Louis Consulate, St. Louis, Mo.                       | 67 West Church St.<br>Philadelphia, Pa. |
| 2                 | KOLWEY       | Florence M.                                                                  | 28        | f   |                      | St. Charles, Missouri<br>November 14, 1906                                                                                               | 11/10/35 St. Louis - registered as citizen                                                                  | Philadelphia, Pa.                       |
| 3                 |              | Admitted at Philadelphia, August 2, 1935 - Transferred from alien crew list. |           |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 4                 |              | George H. Harms                                                              |           |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 5                 |              | Immigrant Inspector                                                          |           |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 6                 |              |                                                                              |           |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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- 32 -

IMPORTANT NOTICE.— 1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







# AFFIDAVIT OF SURGEON

I, JOSEPH GRABENSTEIN, Surgeon of the S.S. "CARRILLO", SAILING THEREWITH, do solemnly, sincerely, and truly SWEAR that I have had THIRTY years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of STATE OF NEW YORK, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

*Joseph Grabenstein*

Sworn to before me this FOURTH day of AUGUST, 19 35

at PHILADELPHIA, PA.

*Thos. J. Lewis*  
*Inspector*

Note.—If a surgeon sails with the vessel, this affidavit of verification shall be executed before an immigration officer at port of arrival, and any changes that may have occurred en route in the condition of any of the aliens must be noted on the manifest before the affidavit is executed.  
If no surgeon sails with the vessel, the affidavit of verification shall be executed at the port of departure before some officer authorized to administer oaths.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the stock from which aliens sprang and the language they speak. The original stock or blood shall be the basis of the classification, the mother tongue to be used only to assist in determining the original stock.

|                  |                   |                                               |
|------------------|-------------------|-----------------------------------------------|
| African (black). | Greek.            | Roumanian.                                    |
| Armenian.        | Hebrew.           | Russian.                                      |
| Bohemian.        | Herzegovinian.    | Ruthenian (Russniak).                         |
| Bosnian.         | Irish.            | Scandinavian (Norwegians, Danes, and Swedes). |
| Bulgarian.       | Italian (North).  | Scotch.                                       |
| Chinese.         | Italian (South).  | Servian.                                      |
| Croatian.        | Japanese.         | Slovak.                                       |
| Cuban.           | Korean.           | Slovenian.                                    |
| Dalmatian.       | Lithuanian.       | Spanish.                                      |
| Dutch.           | Magyar.           | Spanish American.                             |
| East Indian.     | Mexican.          | Syrian.                                       |
| English.         | Montenegrin.      | Turkish.                                      |
| Finnish.         | Moravian.         | Welsh.                                        |
| Flemish.         | Pacific Islander. | West Indian (other than Cuban).               |
| French.          | Polish.           |                                               |
| German.          | Portuguese.       |                                               |



1A

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This (pink) sheet is for the listing of \_\_\_\_\_

3509

S. S.

" GARRILLO "

## Passengers sailing from

BARRIOS, GUATEMALA

JULY 28TH

19 35

Total passengers . . . . .

U. S. citizens . . . . .

Aliens . . . . .

\* Permanent residence within the meaning of this manifest shall be actual or intended residence of one year or more.



## STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer

FIRST-CABIN PASSENGERS ONLY

## Arriving at Port of

PHILADELPHIA, PA

AUGUST 4TH

19 35

List

The entries on this sheet must be typewritten or printed.

[illegible]

Notes: Full text of question 28 is as follows: Whether a person who believes in or advocates the overthrow by force or violence of the Government of the United States or of all forms of law, or who believes in or is supposed to incite organized government, or who advocates the assassination of public officials, or who advocates or teaches the unlawful destruction of property, or is a member of an affiliated with any organization, conference and teaching disunion or opposition to organized government or which teaches the unlawful destruction of property, or who advocates or teaches the same, the necessity, or propriety of the unlawful assaulting or killing of any officer or officers, either of specific individuals or of officers generally, of the Government of the United States or of any other organized government because of his or their official character.

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# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, **MASTER**, of the **S.S. "CARRILLO"**, from **BARRIOS, GUATEMALA**, do solemnly, sincerely, and truly **SWEAR** that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, **ONE** in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this **FOURTH** day of **AUGUST**, 19**35**  
at **PHILADELPHIA, PA.**

*James J. [Signature]*  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate manifests should be prepared for each port at which passengers embark for the United States, recording on separate manifests immigrants and nonimmigrants as defined by the Immigration Act of 1924; and also recording on separate manifests those aliens traveling in the third class and the so-called tourist class, whose visas bear the initials of Technical Advisers, and those whose visas do not bear such initials. The names of all members of a family shall appear upon the same manifest sheet when they travel in the same class; and if they travel in different classes, appropriate cross references should be made on the sheets on which the respective names are listed.

**Column 2 (Honor law status).**—Steamship lines should make no entries in this column. The space is for use of Government officials only.

**Column 3 (Age).**—The answer in this column should be expressed in years or months, whichever applies only to those under 1 year of age.

**Column 4 (Sex).**—The entry should be either M (male) or F (female).

**Column 5 (Married or single).**—The answer should be M (married), S (single), Wd (widowed), or D (divorced).

**Column 6 (Calling or occupation).**—The entry should describe as accurately as possible the occupation, trade, or profession of each alien arrival, as, for example, Civil engineer, railway engineer, locomotive engineer, mining engineer, brass polisher, steel polisher, iron molder, wood turner, etc., and not simply as engineer, polisher, molder, turner, or other indefinite designations.

A distinction should be made between farmers and farm laborers, regardless of the amount of money shown, as follows:

A farmer is one who operates a farm either for himself or for others.

A farm laborer is one who works on a farm for the man who operates it.

Steamship companies should make this distinction on the manifests, and corrections should be made, if necessary, by inspectors and registry clerks during the personal examination of alien arrivals.

**Column 8 (Date to read and write).**—This column is subdivided and contains the following questions: "Read what language for, if exemption is claimed, upon what grounds?" In answering this question the language or dialect the alien is able to read should be stated. If alien is unable to read and claims exemption from the reading requirement, the ground for such exemption should be given.

**Column 9 (Nationality).**—Question 9 should be construed to mean the country of which alien is a citizen or subject.

**Column 10 (Name or people).**—See list of races printed on back of this sheet. The entry should show the race or people as given in said list.

Special attention should be paid to the distinction between race and the country of which citizen or subject, country of last permanent residence, and country of birth, and manifests should be carefully revised by inspectors and registry clerks in this regard. For instance, "France" appearing under the head of country does not mean "French" by race or people and, similarly, "French" appearing under the head of race or people does not mean "France" by country. An Irish, German, or Hebrew alien by race might properly come under the heading of England, Switzerland, or any other country. In this connection the following distinctions should be especially observed:

### CUBAN

The term "Cuban" refers to the Cuban people (not Negroes).

### WEST INDIAN

"West Indian" refers to the people of the West Indies other than other Cubans or Negroes.

### SPANISH AMERICAN

"Spanish American" refers to the people of Central and South America of Spanish descent.

### AFRICAN (BLACK)

"African (black)" refers to the African Negro, whether coming from Cuba or other islands of the West Indies, North or South America, Europe, or Africa. Any alien with admixture of blood of the African Negro should be classified under this heading.

### ITALIAN (NORTH)

The people who are native to the basin of the River Po in northern Italy (i. e., compartments of Piedmont, Lombardy, Venetia, and Friuli) and their descendants, whether living in Italy, Switzerland, Austria, or any other country, should be classed as Italian (north). Most of these people speak a Gallic dialect of the Italian language.

### ITALIAN (SOUTH)

The people who are native to that portion of Italy south of the basin of the River Po (i. e., compartments of Liguria, Tuscany, the Marches, Umbria, Rome, the Abruzzi and Molise, Campania, Apulia, Basilicata, Calabria, Sicily, and Sardinia) and their descendants should be classed as "Italian (south)."

**Column 11 (Place of birth).**—The State, Province, or District of birth should be shown in addition to the city or town.

**Column 12 (Serial number of document presented).**—Prefix serial number of document with abbreviation "QIV," "NQIV," "PV," or "RP" as appropriate, to designate whether it is (Quota Immigration Visa, Nonquota Immigration Visa, Passenger Visa, or Reciprocity Permit) and also state section of the Immigration Act of 1924 involved, as Section 4 (a).

**Column 13.**—This question has reference to the place and date of issue of the document described in column 12, and is self-explanatory.

**Column 14 (Conditions of landing, etc.).**—Steamship lines should make no entries in this column. The space is for use of Government officials only.

**Column 15 (Last permanent residence).**—Actual or an intended residence of one year shall constitute permanent residence. The last country in which alien resided with the intention of remaining one year or more shall be the last permanent residence regardless of length of actual residence therein. The entries in column 15 should show the country, city or town, state, province, or district of last permanent residence. It is important for statistical purposes that steamship companies accurately show country of last permanent residence independent of country of temporary residence, country of birth, nationality, or race.

Country of last permanent residence of aliens who are permanent residents of the United States and are returning from a visit abroad should be recorded "United States."

**Column 17 (Name and complete address of nearest relative on record in country of origin, etc.).**—The entry should give name, exact relationship, and complete address of such relative. If no such relative living, give name and address of friend. If no such relative or friend living in country whence alien came, give name and address of relative or friend in country of which citizen or subject, if such country is other than that whence alien came. Address should include street and number.

**Column 18 (Intend destination).**—The answer to this question shall show the intended future permanent residence. An intended residence of one year shall constitute permanent residence. The entry should show definitely the place (city or town) or intended future permanent residence, if within the United States; country, if outside the United States, and port of intended departure.

**Column 19 (Whether having a ticket to such final destination).**—The answer should be either Yes (ticket) or No (no ticket).

**Column 20 (By whom fare passage paid).**—The entry should show definitely by whom passage was paid, as self, husband, father, brother, or other relative; friend; steamship company, etc.

**Column 21 (Whether in possession of \$10, and if less, how much).**—The answer should give in each case (individual or family) the exact amount of money, whether money brought by the head of a family should not be divided among the several members of the family.

**Column 22 (Whether ever before in the United States; and if so, when, where, and date of last departure).**—The entries should show whether or not (Yes or No) in the United States before; and if so, the year (or period of years) and place, as 1891, 1897, Philadelphia. Where in the United States more than once previously, indicate last time only, and give exact or approximate date of last departure from the United States.

**Column 23 (Whether going to join relative or friend).**—The answer should show whether going to join either a relative or friend, with name and complete address; and if a relative, the exact relationship.

**Columns 24 to 30.**—These questions are self-explanatory and the answers, like all others on the sheet, are subject to revision by inspection officers in the examination of aliens. However, in answering question 30, if alien has been excluded and deported within one year and the Secretary of Labor has authorized him to reapply for admission, the authority for such reapplication should be given.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Arrive* S. S. "CARRILLO" sailing from PHILADELPHIA, Pa. JULY 22ND, 1935, Arriving at Port of PHILADELPHIA, PA, AUGUST 4TH, 1935

| No.<br>on<br>List                          | NAME IN FULL |                       | AGE  | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                   |
|--------------------------------------------|--------------|-----------------------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|                                            | FAMILY NAME  | GIVEN NAME            |      |     |                      |                                                                                                                                          |                                                                                                              |                                            |
| CRUISE PASSENGERS EMBARKED AT PHILADELPHIA |              |                       |      |     |                      |                                                                                                                                          |                                                                                                              |                                            |
| ✓ 1                                        | BRAIK        | JOHN                  | ✓ 55 | M   | S                    |                                                                                                                                          | Federal Court, 1st Dist. Philadelphia<br>May, 1925 <i>28 2038226 Phila. 5/1/25</i>                           | 1217 Cobb's Creek Blvd.<br>Phila. Pa. ✓    |
| ✓ 2                                        | BROWN        | LINDSAY               | ✓ 27 | F   | S                    | May 30 1908, Phila. Pa.                                                                                                                  |                                                                                                              | Laurel Road<br>Stratford, N. J. ✓          |
| ✓ 3                                        | COLE         | WILLIAM               | ✓ 50 | M   | M                    | Jan. 13 1884, Washington, D. C.                                                                                                          |                                                                                                              | 2153 California St.<br>Washington, D. C. ✓ |
| ✓ 4                                        | COLE         | MABEL <i>wife</i>     | ✓ 50 | F   | M                    | Aug. 5 1884, Harrisonburg, Va.                                                                                                           |                                                                                                              | DO                                         |
| ✓ 5                                        | DOYLE        | THOMAS                | ✓ 40 | M   | S                    | July 1 1895, Tremont, Pa.                                                                                                                |                                                                                                              | Penn A. C.<br>Phila. Pa. ✓                 |
| ✓ 6                                        | DUNNE        | MATHEW                | ✓ 45 | M   | S                    | Feb. 27 1890, Phila. Pa. ✓                                                                                                               |                                                                                                              | 4718 Springfield Ave.<br>Phila. Pa. ✓      |
| ✓ 7                                        | FOX          | CHARLES               | ✓ 26 | M   | M                    | Apr. 12 1909, Phila. Pa.                                                                                                                 |                                                                                                              | Springhouse, Pa. ✓                         |
| ✓ 8                                        | FOX          | MARION                | ✓ 22 | F   | M                    | Dec. 13 1912, Phila. Pa.                                                                                                                 |                                                                                                              | DO                                         |
| ✓ 9                                        | GILL         | JOSEPH                | ✓ 37 | M   | S                    | Mar. 21 1898, Phila. Pa.                                                                                                                 |                                                                                                              | Penn A. C.<br>Phila. Pa. ✓                 |
| ✓ 10                                       | HANSEN       | EMILY                 | ✓ 42 | F   | S                    | Jan. 3 1889, Phila. Pa.                                                                                                                  |                                                                                                              | 6516 N 17th Street<br>Phila. Pa. ✓         |
| ✓ 11                                       | HANSEN       | EVA <i>wife</i>       | ✓ 47 | F   | S                    | Oct. 3 1887, Phila. Pa.                                                                                                                  |                                                                                                              | DO                                         |
| ✓ 12                                       | Longbottom   | ALBERT                | ✓ 53 | M   | M                    | June 24 1882, Phila. Pa.                                                                                                                 |                                                                                                              | 440 Sycamore Avenue<br>Merion, Pa. ✓       |
| ✓ 13                                       | Longbottom   | JULIA <i>wife</i>     | ✓ 51 | F   | M                    | Sept 26 1884, Crisfield, Md.                                                                                                             |                                                                                                              | DO                                         |
| ✓ 14                                       | McCOLLUM     | KATHRYN               | ✓ 36 | F   | S                    | Nov. 12 1898, Phila. Pa.                                                                                                                 |                                                                                                              | 648 S 59th Street<br>Phila. Pa. ✓          |
| ✓ 15                                       | McDAID       | ELEANOR               | ✓ 35 | F   | S                    | Jan. 27 1896, Phila. Pa.                                                                                                                 |                                                                                                              | 7921 Brunswick Avenue<br>Phila. Pa. ✓      |
| ✓ 16                                       | RALSTON      | WILLARD               | ✓ 35 | M   | M                    | Nov. 13 1899, Steubenville, Ohio                                                                                                         |                                                                                                              | 3450 Queen's Lane<br>Phila. Pa. ✓          |
| ✓ 17                                       | RALSTON      | ELIZABETH <i>wife</i> | ✓ 35 | F   | M                    | Jan. 13 1900, Salt Lake City, Utah                                                                                                       |                                                                                                              | DO                                         |
| ✓ 18                                       | ROGERS       | G. WHITNER            | ✓ 49 | M   | M                    | July 24 1886, Burlington, N. J.                                                                                                          |                                                                                                              | 1042 Montgomery Avenue<br>Warberth, Pa. ✓  |
| ✓ 19                                       | ROGERS       | REBA <i>wife</i>      | ✓ 44 | F   | M                    | Nov. 19 1893, Harrisburg, Pa.                                                                                                            |                                                                                                              | DO                                         |
| ✓ 20                                       | RORABAUGH    | NEWTON                | ✓ 54 | M   | M                    | Aug. 11 1881, Curwensville, Pa.                                                                                                          |                                                                                                              | Elkins Court Apts.<br>Elkins Park, Pa. ✓   |
| ✓ 21                                       | RORABAUGH    | MARIE <i>wife</i>     | ✓ 46 | F   | M                    | Sept 14 1889, New Brunswick, N. J.                                                                                                       |                                                                                                              | DO                                         |
| ✓ 22                                       | RORABAUGH    | HELEN <i>wife</i>     | ✓ 16 | F   | S                    | Mar. 18 1920, Glen Ridge, N. J.                                                                                                          |                                                                                                              | DO                                         |
| ✓ 23                                       | ROTH         | LEWIS                 | ✓ 50 | M   | M                    | Oct. 3 1884, Phila. Pa.                                                                                                                  |                                                                                                              | 5416 Fairhill Avenue<br>Phila. Pa. ✓       |
| ✓ 24                                       | SMITH        | GERTRUDE              | ✓ 48 | F   | S                    | Nov. 5 1886, Phila. Pa.                                                                                                                  |                                                                                                              | 6701 N 12th Street<br>Phila. Pa. ✓         |
| ✓ 25                                       | STRIEBY      | MALCOLM               | ✓ 37 | M   | S                    | Sept 26 1897, Swarthmore, Pa.                                                                                                            |                                                                                                              | 112 Rutgers Avenue<br>Swarthmore, Pa. ✓    |
| ✓ 26                                       | STRIEBY      | EMILY                 | ✓ 70 | F   | M                    | Jan. 1 1865, Phila. Pa.                                                                                                                  |                                                                                                              | DO                                         |
| ✓ 27                                       | YEO          | EDWIN                 | ✓ 27 | M   | S                    | July 7 1908, Phila. Pa.                                                                                                                  |                                                                                                              | 3445 N 18th Street<br>Phila. Pa. ✓         |
| ✓ 28                                       | ZELLER       | CAROLYN               | ✓ 26 | F   | S                    | July 30 1910, Phila. Pa.                                                                                                                 |                                                                                                              | 433 E. Mt. Airy Avenue<br>Phila. Pa. ✓     |
| 29                                         |              |                       |      |     |                      |                                                                                                                                          |                                                                                                              |                                            |
| 30                                         |              |                       |      |     |                      |                                                                                                                                          |                                                                                                              |                                            |

*28 W. City Examiner 7/15*

*John J. ...*

*Inspector*

*- 34 -*

*28 264 City admitted 8/15*  
*— 34 —*

Line. UNITED FRUIT  
Owners. UNITED FRUIT COMPANY  
Local Agents. UNITED FRUIT COMPANY

- IMPORTANT NOTICE.—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

**LIST OF UNITED STATES CITIZENS**  
(FOR THE IMMIGRATION AUTHORITIES)

*Ames*  
S. S. "CARRILLO" sailing from BARRIOS, GUATEMALA, JULY 28TH, 19 35, Arriving at Port of PHILADELPHIA, PA. AUGUST 4TH, 19 35

| No.<br>on<br>List | NAME IN FULL                              |                       | AGE  |      | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES               |  |
|-------------------|-------------------------------------------|-----------------------|------|------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------|--|
|                   | FAMILY NAME                               | GIVEN NAME            | Yrs. | Mos. |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
|                   | PASSENGERS EMBARKED AT BARRIOS, GUATEMALA |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 1                 | CAMPBELL                                  | KATHRYN               | 28   |      | F   | S                    | Jan. 5 1907, Coming, Iowa                                                                                                                |                                                                                                              | 2515 35th Street<br>Des Moines, Iowa ✓ |  |
| 2                 | HILLER                                    | LEJAREN               | 55   |      | M   | M                    | July 3 1880, Milwaukee, Wisc.                                                                                                            |                                                                                                              | 332 W 28th Street<br>New York, N. Y. ✓ |  |
| 3                 | HILLER                                    | ANITA <i>wife</i>     | 34   |      | F   | M                    | Nov. 26 1901, Wheeling, W. Va.                                                                                                           |                                                                                                              | DO                                     |  |
| 4                 | HILLER                                    | LEJAREN JR <i>son</i> | 11   |      | M   | S                    | Feb. 25 1924, New York, N. Y.                                                                                                            |                                                                                                              | DO                                     |  |
| 5                 |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 6                 |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 7                 |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 8                 |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 9                 |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 10                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 11                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 12                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 13                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 14                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 15                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 16                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 17                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 18                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 19                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 20                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 21                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 22                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 23                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 24                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 25                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 26                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 27                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 28                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 29                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |
| 30                |                                           |                       |      |      |     |                      |                                                                                                                                          |                                                                                                              |                                        |  |

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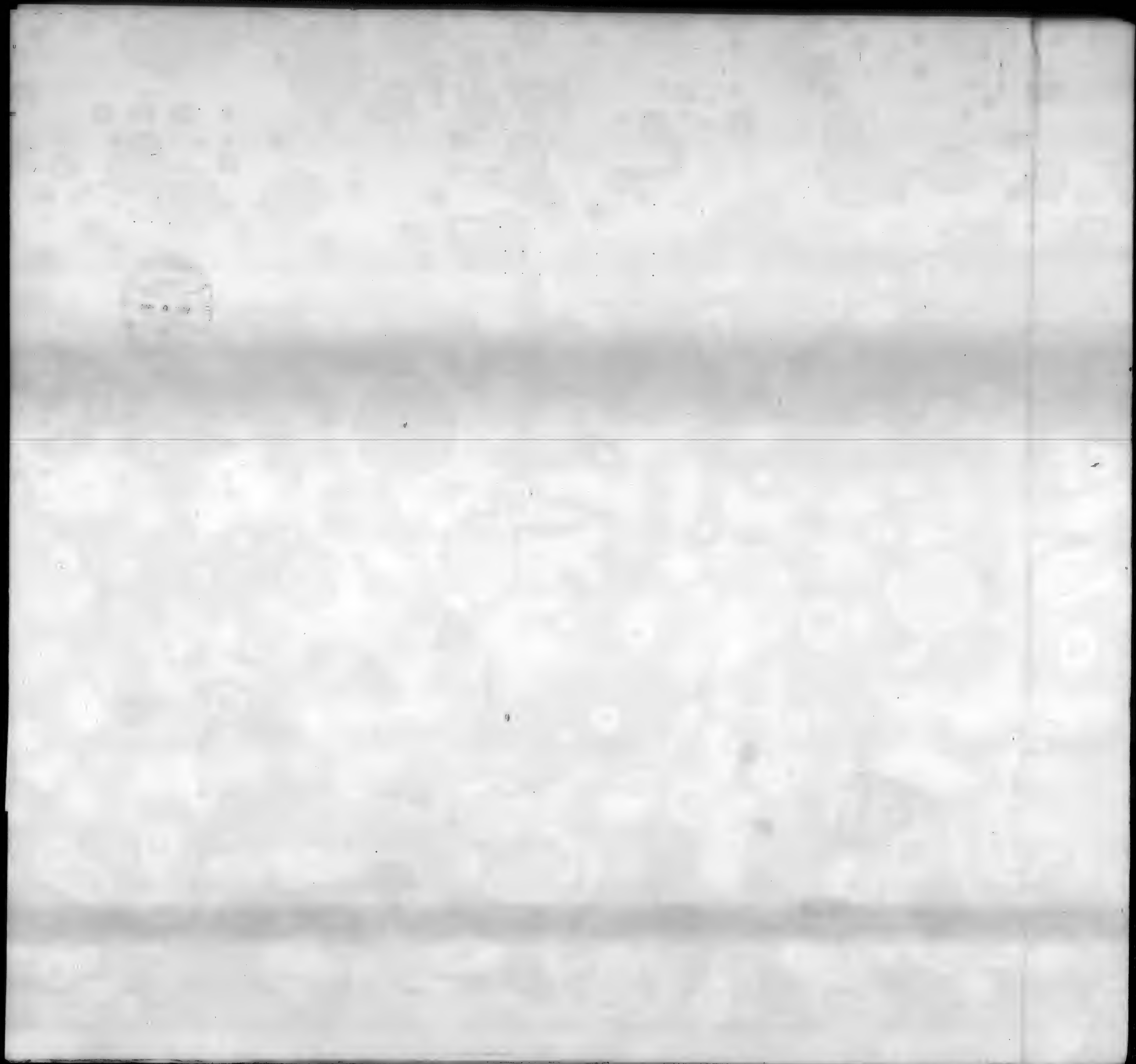
*4. Civ. City admitted 7/2/35  
Mrs. Hiller's  
signature*

- 35 -

Line... UNITED FRUIT  
Owners... UNITED FRUIT COMPANY  
Local Agents... UNITED FRUIT COMPANY

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3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. ATEXAS

Sailing from NEW YORK Frontera, Mexico, JULY 31, 1935, Arriving at Port of Philadelphia Pa

August 6, 1935

| No.<br>on<br>List | NAME IN FULL |             | AGE | Yrs. Mos. | Sex | MARRIED<br>OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES          |
|-------------------|--------------|-------------|-----|-----------|-----|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------|
|                   | FAMILY NAME. | GIVEN NAME. |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
|                   |              |             |     |           |     |                         | Passengers from New York to Philadelphia 23 July 1935 (Cruise)                                                                            |                                                                                                               |                                   |
| 1                 | Aspell       | Carleton ✓  | 53  | M         | M   |                         | Passaic NJ 2 Aug 1881                                                                                                                     |                                                                                                               | 106 Washington Ave, Clifton NJ    |
| 2                 | Bloom        | Zelda ✓     | 24  | F         | S   |                         | Washington DC 30 Aug 1910                                                                                                                 |                                                                                                               | 2507 Brookfield Ave, Baltimore Md |
| 3                 | Bull ✓       | Amy ✓       | 36  | F         | S   |                         | Harrison NY 10 May 1899                                                                                                                   |                                                                                                               | 80 Cranberry St B'klyn NY         |
| 4                 | Cox          | Charles ✓   | 42  | M         | M   |                         | Lutherville Md ✓ 31 Dec 1892                                                                                                              |                                                                                                               | 18 Willette St Albany NY          |
| 5                 | Cox          | Esther ✓    | 39  | F         | M   |                         | Whitman Mass 19 Oct 1895                                                                                                                  |                                                                                                               | do                                |
| 6                 | Denton       | Arthur ✓    | 26  | M         | S   |                         | B'klyn NY ✓ 7 Jan 1909                                                                                                                    |                                                                                                               | 219 East 17th St B'klyn NY        |
| 7                 | D'Alessandro | Anthony ✓   | 29  | M         | M   |                         |                                                                                                                                           | Fathers Papers, Circuit Court of Phila.                                                                       | 225 North 63rd St Phila. Pa       |
| 8                 | D'Alessandro | Henrietta ✓ | 26  | F         | M   |                         | Philadelphia Pa 2 Sept 1908                                                                                                               |                                                                                                               | do                                |
| 9                 | Forbes       | Adelaide ✓  | 33  | F         | M   |                         | Philadelphia Pa 28 Nov 1901                                                                                                               |                                                                                                               | 3310 Powelton Ave Phila Pa        |
| 10                | Foster       | Adelaide ✓  | 55  | F         | M   |                         | Philadelphia Pa 1 Apr 1880                                                                                                                |                                                                                                               | do                                |
| 11                | Fox          | Maurice ✓   | 50  | M         | M   |                         | New York NY 10 Feb 1885                                                                                                                   |                                                                                                               | 1959 82nd St B'klyn NY            |
| 12                | Friedman     | Peggy ✓     | 24  | F         | S   |                         | Baltimore Md ✓ 27 May 1911                                                                                                                |                                                                                                               | 2513 Shirley Ave Baltimore Md     |
| 13                | Hart         | Gladys ✓    | 24  | F         | S   |                         | Philadelphia Pa 23 Aug 1910                                                                                                               |                                                                                                               | 2836 Diamond St Phila Pa          |
| 14                | Kraus        | Mildred ✓   | 35  | F         | S   |                         | Baltimore Md 24 Apr 1900                                                                                                                  |                                                                                                               | 2210 Walbrook Ave Baltimore Md    |
| 15                | Lutz         | John ✓      | 28  | M         | S   |                         | Newark NJ 8 May 1907                                                                                                                      |                                                                                                               | 315 Chadwick Ave Newark NJ        |
| 16                | Megary       | Robert ✓    | 42  | M         | M   |                         | Baltimore Md 19 Jan 1893 ✓                                                                                                                |                                                                                                               | 3017 Ferndale Ave Baltimore Md    |
| 17                | Megary       | Louise ✓    | 42  | F         | M   |                         | Baltimore Md 11 Jan 1893 ✓                                                                                                                |                                                                                                               | do                                |
| 18                | Morrow       | May ✓       | 51  | F         | S   |                         | Philadelphia Pa 15 Oct 1883                                                                                                               |                                                                                                               | 1519 Venago St Phila. Pa          |
| 19                | Rubin        | William ✓   | 23  | M         | S   |                         | Philadelphia Pa 22 Feb 1912                                                                                                               |                                                                                                               | 2329 South Mildred St Phila. Pa   |
| 20                | Steed ✓      | Kathryn ✓   | 25  | F         | S   |                         | Coatesville Pa 1 Mar 1910                                                                                                                 |                                                                                                               | 2805 Diamond St Phila Pa          |
| 21                | Thompson     | Emery ✓     | 40  | M         | S   |                         | Elizabeth Pa 28 Dec 1894 ✓                                                                                                                |                                                                                                               | 920 5th Ave Elizabeth, NJ TA      |
| 22                | Weishar      | Edward ✓    | 43  | M         | S   |                         | Brooklyn NY 14 Feb 1891 ✓                                                                                                                 |                                                                                                               | 854 Broadway B'klyn NY            |
| 23                | Womack ✓     | Anna ✓      | 72  | F         | M   |                         | Reidsville NC 5 Sept 1862 ✓                                                                                                               |                                                                                                               | 29 Cascade Ave Winston-Salem NC   |
| 24                | Womack       | Estelle ✓   | 37  | F         | S   |                         | Reidsville NC 7 Nov 1898 ✓                                                                                                                |                                                                                                               | 80 Cranberry St B'klyn NY         |
| 25                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 26                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 27                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 28                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 29                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 30                |              |             |     |           |     |                         |                                                                                                                                           |                                                                                                               |                                   |

24 U.S. Citizens admitted  
Samuel Horowitz  
U. S. IMMIGRANT INSPECTOR

Stark  
Macher

- 36 -

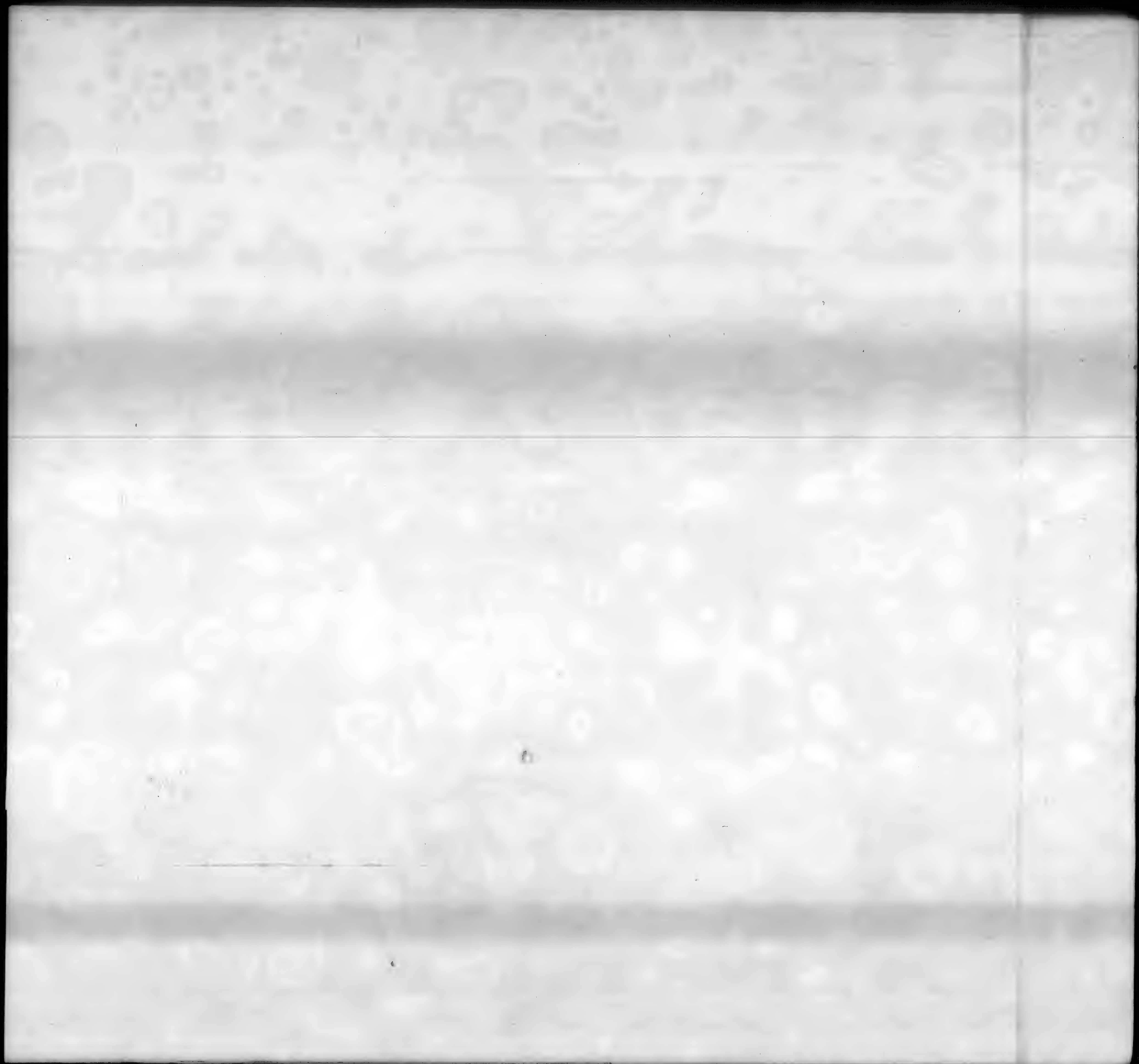
24 U.S. Citizens admitted  
Samuel Horowitz  
U. S. IMMIGRANT INSPECTOR

H. K. K. K.  
Master

- 36 -

- IMPORTANT NOTICE.**—1. Great care should be taken *not* to place on this list the name of any passenger who was not born in the United States or who has not taken out final naturalization papers.  
2. Where one or more members of a family are aliens, the names of *all* such members should be recorded upon the *alien* manifest. Suitable notation may be made upon such manifest opposite the names of those members who claim citizenship.  
3. Failure to observe the terms of this notice may result in delay to passengers at the port of arrival.  
4. List on this form only United States citizens or citizens of an insular possession of the United States.







REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. ATENAS

arriving at the

Port of PHILADELPHIA PA.

on AUGUST 6, 19 35

| NAME<br>(In full) | Sex | Age | NATIVITY | CLASS<br>(First, second, third, or steerage) | PASSENGER<br>Master's<br>Sheet No. | DIAGNOSIS | PRESENT<br>PHYSICAL<br>CONDITION | REMARKS | (This column reserved for U. S. Medical Examiners' notations.) | In this column Immigrant Inspectors will note U. S. citizens. |
|-------------------|-----|-----|----------|----------------------------------------------|------------------------------------|-----------|----------------------------------|---------|----------------------------------------------------------------|---------------------------------------------------------------|
|-------------------|-----|-----|----------|----------------------------------------------|------------------------------------|-----------|----------------------------------|---------|----------------------------------------------------------------|---------------------------------------------------------------|

NONE

\*\*\*\*\*

\*\*\*\*\*

\*\*\*\*\*

**To the U. S. Commissioner of Immigration:**

I hereby declare that to the best of my knowledge and belief the foregoing is a true and complete statement of the diseases, injuries, births, and deaths among the passengers during the voyage.

Sworn to before me,

PHILADELPHIA, PA.  
AUG 6 1935

*Samuel Horowitz*  
U. S. Immigration Inspector

*Reginald A. Luccan, M.D.*  
Ship's Surgeon

Excerpt from Section 16 of the Immigration Act of February 4, 1917: "Inspection shall have power to administer oaths \* \* \* and any person to whom such an oath has been administered under the provisions of this act who thereafter is found to be a false person or who makes a false statement in any way affecting or in relation to the right of an alien to admission \* \* \* to the United States, shall be deemed guilty of perjury and be punished as provided by section 1 of the act approved March 4, 1907."

-37-

**IMPORTANT NOTICE.**

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|                                                            |          |
|------------------------------------------------------------|----------|
| U. S. DEPARTMENT OF LABOR<br>IMMIGRATION SERVICE           | Form 142 |
| Ship's Surgeon                                             | 19       |
| REPORT                                                     |          |
| Diagnoses, Injuries, Births, and Deaths during the voyage. |          |

## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1922.

### INSTRUCTIONS.

To masters and medical officers of ships, and others concerned:

Under the authority of section 13 of the act of Congress of February 5, 1917, it is hereby directed that on the arrival of a ship bringing passengers from a foreign port to any port of the United States the ship's surgeon shall deliver in person to the United States Commissioner of Immigration, or his authorized representative, a complete report of the diseases (including manifestations of epilepsy, hysteria, or insanity), injuries, births, and deaths which have occurred among the passengers during the voyage.

Said report shall state in each instance the name of the passenger concerned; whether a first cabin, second cabin, or steerage passenger or a stowaway; the letter or number used to designate the sheet of the passenger manifest on which the said passenger's name is to be found; and the number indicating the position of his name on said sheet; the nature of the disease or injury from which he is or has been suffering and his actual condition at the time of arrival (e. g., "improved," "recovered," "moribund," "dead").

Under the heading "Remarks" the ship's surgeon will make such notations as "able to travel," "accompanied by family," "removed at quarantine," "removed at quarantine with family," "in ship's hospital," or other remarks which may be of assistance to the United States Immigration officers in protecting the welfare of the sick or in accounting for missing passengers.

Diagnoses and all other statements appearing in said report must be written legibly, but need not be in English if the ship's surgeon be more familiar with another language. The ship's surgeon shall furthermore declare on oath that to the best of his knowledge and belief his report, as herein prescribed, comprises a true and complete statement of all the diseases, injuries, births, and deaths which have occurred during the voyage.

The Commissioners of Immigration at the various ports of the United States have full authority to prevent the debarkation of the passengers from a ship until the ship's surgeon, or, in lieu thereof, the master of the ship, shall have furnished a medical report, as above indicated.

W. W. HUSBAND,  
Commissioner General of Immigration

APPROVED:  
JAMES J. DAVIS,  
Secretary of Labor.

### TRADUZIONE D'ISTRUZIONI

Ai capitani e medici di navi ed a chiunque spetti:

A norma del paragrafo 13 dell'Atto del Congresso degli Stati Uniti, il 5 di Febbraio, 1917, viene con questo mezzo decretato che, all'arrivo in un porto degli Stati Uniti d'una nave, che trasporta passeggeri da un porto estero, il medico di bordo dovrà consegnare personalmente nelle mani del Commissario d'Immigrazione (Commissioner of Immigration), o del suo rappresentante autorizzato, un completo rapporto di tutte le malattie (compresi gli indizi d'epilessia, d'isterismo, o d'insania), le ferite, le nascite, e le morti, che siano avvenute durante il viaggio fra i passeggeri.

Detto rapporto dovrà indicare in ogni caso il nome del passeggero in questione, la sua condizione a bordo, se passeggero di prima, seconda, terza classe o clandestino; portare la lettera o il numero del foglio del manifesto sul quale è inscritto il nome del detto passeggero, altresì il numero d'ordine, che serve a indicare la posizione del suo nome sul foglio medesimo; spiegare la natura del male, che esso soffre e la sua condizione fisica al momento d'arrivo, p. es., "migliorato," "guarito," "moribondo," "morto."

Sotto la rubrica "Remarks," il medico di bordo dovrà apporre tali annotazioni come, p. es., "abile a continuare il viaggio," "accompagnato da famiglia," "sbarcato a quarantena," "sbarcato a quarantena con famiglia," "nell'ospedale a bordo," o qualsiasi annotazione, che possa essere d'aiuto agli uffiziali d'Immigrazione, sia per proteggere gli interessi degli ammalati, sia per rendersi conto dei passeggeri mancanti.

La diagnosi ed ogni altra dichiarazione dovranno essere scritte in modo leggibile; però non necessariamente in Inglese, se il medico di bordo conosce meglio un'altra lingua.

Il medico di bordo dovrà altresì dichiarare sotto giuramento, per quanto a lui consti in buona fede, che il suo rapporto comprende una esatta e piena descrizione di tutte le malattie, le ferite, le nascite e le morti, che siano successe durante il viaggio.

I commissari d'Immigrazione nei diversi porti degli Stati Uniti hanno pieni poteri per impedire lo sbarco ai passeggeri d'una nave, sino a che il medico, o mancando il medico, il capitano della nave stessa avrà fornito loro il rapporto come sopra indicato.

### UEBERSETZUNG DER INSTRUCTIONEN.

An die Schiffskapitane, Schiffsärzte, und andere, die es betrifft:

Auf Grund des Abschnitts 13 der Congressbestimmungen, am 5. Februar, 1917, wird hiermit angeordnet, dass der Schiffszarzt eines jeden von einem ausländischen Hafen kommenden und in einen Hafen der Vereinigten Staaten einlaufenden Passagierschiffes persönlich dem Einwanderungs-Kommissar oder seinem bevollmächtigten Stellvertreter einen vollständigen Bericht über Krankheiten, eingetragene Kurdehlungen von Epilepsie, Hysterie, oder Irnsinn, Verletzungen, Geburten, und Todesfälle, die während der Reise, unter den Passagieren, zu verzeichnen waren, zu nehergehen hat.

Dieser Bericht muss in jeden einzelnen Falle den Namen des betreffenden Passagiers enthalten; ferner ob er in erster oder zweiter Klasse sich befindet, ob er als Zwischenhändler-Passagier oder als blinder Passagier (stowaway) die Reise machte; ferner den Buchstaben oder die Nummer mit denen man gewöhnlich die Seite des Passagiermanifestes, in welchem der Name des betreffenden Passagiers eingeschrieben ist, bezeichnet, und ebenso die Zahl, welche die Stelle des Namens auf der erwähnten Seite bestimmt. Auch soll die Natur der Krankheit oder der Unversehrtheit, an welcher der Passagier leidet oder litt und sein tatsächliches Befinden zur Zeit der Ankunft dazwischen sein (z. B., ob "gebessert," "hergestellt," oder "im Sterben," "tot").

In der Rubrik "Remarks," soll der Schiffszarzt solche Notizen verzeichnen wie, z. B., "reisefähig," "in Begleitung von Familie," "in Quarantäne gehalten," "mit Familie in Quarantäne gehalten," "im Schiffshospital," oder andere Anmerkungen, welche der Einwanderungsbehörde der Vereinigten Staaten für die Verpflegung der Kranken oder für die Aufklärung über fehlende Passagiere von Nutzen sein können.

Diagnosen sowohl als andere in diesem Berichte niedergelegte Beobachtungen müssen leserlich geschrieben, aber nicht notwendiger Weise in der englischen Sprache abgefasst sein, insbesonders wenn der Arzt in einer anderen Sprache sich gewandter und deutlicher ausdrücken kann.

Der Schiffszarzt muss ferner unter Eid erklären, dass der Bericht nach seinem besten Wissen und Gewissen eine vollständige, vollständige Darstellung aller während der Reise, unter den Passagieren, zu verzeichnen waren, Krankheiten, Entsetze, Geburten, und Todesfälle, welche während der Reise zu verzeichnen waren.

Die Einwanderungs-Kommissare in den verschiedenen Hafenplätzen der Vereinigten Staaten haben volle Gewalt, das Landen der Passagiere zu verhindern bis der Schiffszarzt, oder an seiner Stelle der Schiffskapitän, einen medizinischen Bericht abgibt, der den oben genannten Bestimmungen entspricht.

### TRADUCTION DES INSTRUCTIONS.

Aux commandants de navires, aux médecins du bord et à qui de droit:

Conformément à la section No. 13 de l'Acte du Congrès des Etats-Unis, le 5 Février, 1917, vous êtes instruit par les présentes qu'à l'arrivée d'un navire, portant des passagers d'un port étranger à tout port des Etats-Unis, le médecin du bord devra remettre, en personne, au Commissaire d'Immigration des Etats-Unis, ou à un représentant autorisé, un rapport complet des maladies, y compris des indices d'épilepsie, d'hystérie ou d'insanité, des blessures, des naissances, et des décès survenus parmi les passagers pendant le voyage.

Le dit rapport devra faire connaître dans chaque cas le nom du passager en question, la classe à laquelle il appartient, s'il est passager de première ou de seconde, d'entrepont ou passager clandestin (stowaway); de plus, la lettre ou le numéro qui désigne la feuille du manifeste des passagers sur laquelle le nom du dit passager est enregistré, ainsi que le numéro indiquant la position de son nom sur la dite feuille, la nature de la maladie, ou de la blessure de laquelle il est ou était atteint, ou sa condition actuelle au moment de l'arrivée, (tel que: "amélioré," "rétabli," "mourant," "mort").

Sous le titre, "Remarks," le médecin du bord fera des observations, telles que: "ait fait de voyager," "accompagné de famille," "éloigné à la quarantaine," "éloigné à la quarantaine avec famille," "à l'hôpital," "l'infirmerie" du bord," ou autres remarques qui peuvent être d'utilité aux officiers du Bureau d'Immigration des Etats-Unis, soit en surveillant les intérêts des malades, ou en rendant compte des passagers manquants.

La diagnose et tout autre compte rendu dans le dit rapport devront être écrits lisiblement, mais il n'est pas nécessaire que cette disposition soit en Anglais si le médecin peut s'expliquer plus facilement et plus brièvement dans une autre langue.

En outre le médecin devra prêter serment que, de son mieux et d'après sa conscience, son rapport renferme un compte fidèle et complet de toutes les maladies, de toutes les blessures, de toutes les naissances et de toutes les mortalités qui sont survenues pendant le voyage.

Les Commissaires d'Immigration aux divers ports des Etats-Unis ont plein pouvoir d'empêcher le débarquement des passagers d'un navire, jusqu'à ce que le médecin du bord, ou en son lieu le Commandant du navire, aura fourni un rapport médical, comme il a été ordonné ci-dessus.

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Хитов

sailing from Las Piedras, V. Guadalupe, August-1st, 1935, 19 , Arriving at Port of Philadelphia, Pa. August, 8th, 1935, 19

V. Passport # 1-43, issued in. Consulate at  
Marseille, France, on Aug. 14, 1934; amended  
Aug. 3, 1935 include wife & 2 children

7 U.S. Citizens admitted.  
Samuel Horowitz  
U. S. IMMIGRATION INSPECTION

AUG 9 1935

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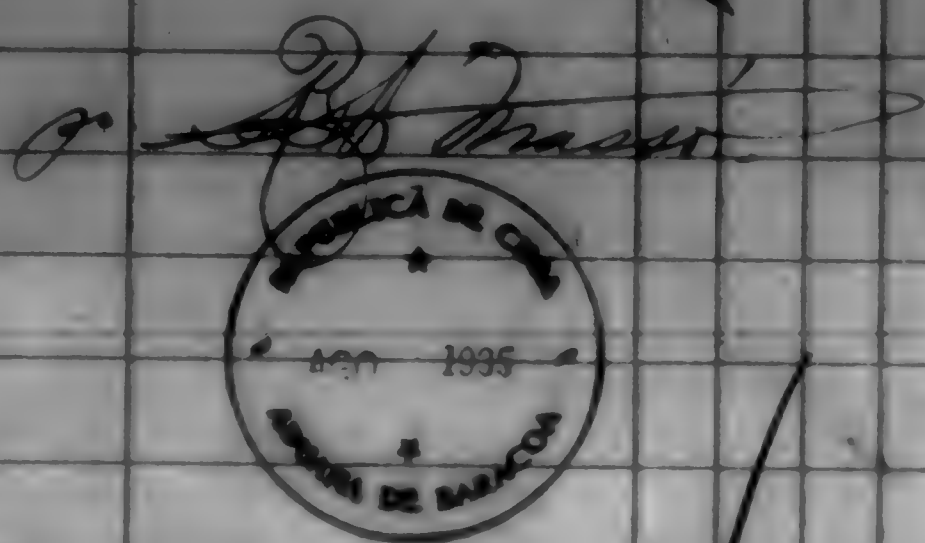
Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. OLANCHO Sailing from Baracoa, Cuba, Aug. 3, 1935, 192, Arriving at Port of Philadelphia, Pa. Aug. 9, 1935, 192

| No.<br>on<br>List | NAME IN FULL |                 | AGE  |      | Sex | Married<br>or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES.       |
|-------------------|--------------|-----------------|------|------|-----|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------|
|                   | FAMILY NAME. | GIVEN NAME.     | Yrs. | Mos. |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 1                 | Awtrey       | Robert E.       | 46   | 5    | M   | M                    | Mar. 13, 1889, Atlanta, Texas                                                                                                             | Capt. 2nd Regt. 1st Cavalry, U.S.A.                                                                           | 850 Park Avenue, New York, N.Y. |
| 2                 | "            | Isabel E.       | 38   | 10   | F   | M                    | Oct. 5, 1896, New York, N. Y.                                                                                                             | Remained for duty in the State                                                                                | "                               |
| 3                 | "            | Robert E. Jr.   | 14   | 10   | M   | S                    | Nov. 13, 1920, New Orleans, La.                                                                                                           | "                                                                                                             | "                               |
| 4                 | "            | Ann E. Awtrey   | 10   | 6    | F   | S                    | Jan. 10, 1925, Wash. D. C.                                                                                                                | "                                                                                                             | "                               |
| 5                 | "            | Alice D. Awtrey | 9    | 9    | F   | S                    | Nov. 14, 1926, New York, N. Y.                                                                                                            | "                                                                                                             | "                               |
| 6                 |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 7                 |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 8                 |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 9                 |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 10                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 11                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 12                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 13                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 14                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 15                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 16                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 17                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 18                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
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| 21                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 22                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 23                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
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| 27                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
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| 29                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |
| 30                |              |                 |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                 |



*5 U.S. Citizens  
admitted!*  
*Samuel Horowitz*  
U. S. IMMIGRANT INSPECTOR

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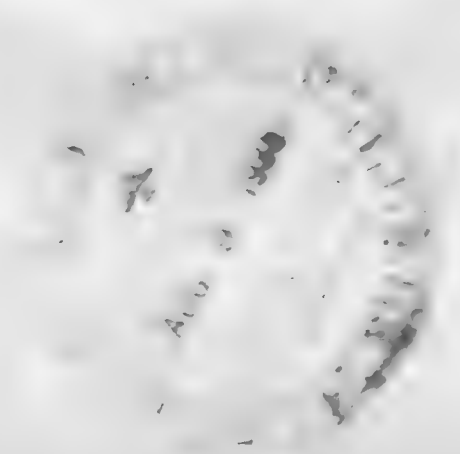
FOR THE IMMIGRATION AUTHORITIES

*Sailing from* Baracoa, Cuba

, Aug. 3, 1935, 192, Arriving at Port of Philadelphia, Pa. Aug. 3, 1935, 192

5 16 Sakya  
admitted. Janine Harvey  
3. 2. 1908







## AFFIDAVIT OF SURGEON

I, H. JAMES DO MORALIS, Surgeon of the U.S. 33rd INFANTRY, and EMPLOYED AS A PHYSICIAN  
solemnly, sincerely, and truly swear that I have had THIRTY years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of STATE OF CALIFORNIA,  
and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Dr. M. Gamochival

Sworn to before me this 21<sup>st</sup> day of Feb 1857

at 2111, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 2681, 2682, 2683, 2684, 2685, 2686, 2687, 2688, 2689, 2690, 2691, 2692, 2693, 2694, 2695, 2696, 2697, 2698, 2699, 2700, 2701, 2702, 2703, 2704, 2705, 2706, 2707, 2708, 2709, 2710, 2711, 2712, 2713, 2714, 2715, 2716, 2717, 2718, 2719, 2720, 2721, 2722, 2723, 2724, 2725, 2726, 2727, 2728, 2729, 2730, 2731, 2732, 2733, 2734, 2735, 2736, 2737, 2738, 2739, 2740, 2741, 2742, 2743, 2744, 2745, 2746, 2747, 2748, 2749, 2750, 2751, 2752, 2753, 2754, 2755, 2756, 2757, 2758, 2759, 2760, 2761, 2762, 2763, 2764, 2765, 2766, 2767, 2768, 2769, 2770, 2771, 2772, 2773, 2774, 2775, 2776, 2777, 2778, 2779, 2780, 2781, 2782, 2783, 2784, 2785, 2786, 2787, 2788, 2789, 2790, 2791, 2792, 2793, 2794, 2795, 2796, 2797, 2798, 2799, 2800, 2801, 2802,

[illegible]

## LIST OF PAGES OR PEOPLE

[illegible][illegible]



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and shall be required to furnish such information as may be required by the United States Customs Service for the purpose of determining the admissibility of such aliens into the United States.

*Amer*  
*S. S.*  
*Passenger*

This pink sheet is for the listing of

3510

Amer  
S. S.

NO. 1000 1000 1000

Passengers sailing from **NEWARK, NEW JERSEY**

This pink sheet is for the listing of

19

[illegible]

Two prisoners

19

4. *Conclusions*

1

\* University of Michigan, Division of Geological Engineering and Geophysics, Department of Geological Engineering and Science, 1306 Tappan Street, Ann Arbor, MI 48109-0625, USA; E-mail: jay@umich.edu



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

List

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA, PA., August 9,, 1935

| 16          | 17                                                                                                                                                         | 18                                                         | 19 | 20                                                                                                                                                                                     | 21                                                        | 22                                                                                            | 23 | 24 | 25                                                                                                               | 26                                 | 27 | 28                   | 29                   | 30                                                                                                                                                                                                              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| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br>(Intended future permanent residence) |    | By whom was passage paid?<br><br>(Whether alien paid for own passage, whether paid by relative, whether paid by other person, or by any organization, society, society, or government) | Whether in possession of U.S. visa and if lost, how much? | Whether ever before in the United States, and if so, when and where?<br>(Last residence only) |    |    | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship | Purpose of coming to United States |    | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization, or whether a member of the Government or of the Army, Navy, or Coast Guard, or of the Marine Corps, or of the Air Force, or of the Coast and Geodetic Survey, or of the Fish and Wildlife Service, or of the Geological Survey, or of the National Aeronautics and Space Administration, or of the National Science Foundation, or of the National Endowment for the Humanities, or of the National Endowment for the Arts, or of the National Endowment for the Historic Sites, Buildings, and Monuments, or of the National Endowment for the Performing Arts, or of the National Endowment for the Arts, or of the National Endowment for the Historic Sites, Buildings, and Monuments, or of the National Endowment for the Performing Arts, or of the National Endowment for the Arts, or of the National Endowment for the Historic Sites, Buildings, and Monuments, or of the National Endowment for the Performing Arts, or of the National Endowment for the Arts, or of the National Endowment for the Historic Sites, Buildings, and Monuments, or of the National Endowment for the Performing Arts, or of the National Endowment for the Arts, or of the National Endowment for the Historic 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*Italian Passenger*  
*Carroll, J. K.*  
*H. H. Swager*  
*U.S.P.H.S.*

ALIEN CERTIFICATE INSULAR TERRITORY  
OFFICIAL No. 60008  
This is to certify that the alien Maurice L. Hyman, citizen of France, has been lawfully admitted to the United States for permanent residence as shown by records of this office as follows:  
Admitted at San Francisco, Cal., 24, 1934, as Passenger  
Status under Immigration Act of 1921, Admitted  
Said alien is admitted to proceed to New York via the seaport of New York, and is entitled to admission at a seaport of continental United States upon identification and surrender of this certificate.  
Personal description of alien: Age, 42; Height, 5'6"; Color of hair, Brown  
Color of eyes, Brown  
Identifying documents in alien's possession, None  
Signature of alien Maurice L. Hyman  
Surrendered at Philadelphia, Pa. to Inspector Lee B. Koch, Aug. 9, 1935

-39-



States, or a port of another insular pos  
**FIRST-CABIN PASSENGERS ONLY**

The entries on this sheet must be typewritten or printed.

PHILADELPHIA, PA.

, August 9, 1935

1. When I am  
in a room I  
will be  
H. H. Swager  
U. S. P. H. S.

139'



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, W. W. CLANDINIEL MASTER of the AMER. SS. W. J. JOHN LIND, from SAN JUAN, PUEERTO RICO, do solemnly, <sup>(Make whether Master, Pilot, or Owner of Vessel)</sup> sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, ONE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

true in every respect.

Sworn to before me this

9th

day of . . .

19

GM

PHILADELPHIA, PA.

*Lee B. Toloh*  
Immigration Officer

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Supervisors must make a list in preparation for each port at which passengers embark for the United States, recording on separate manifests passengers and nonpassengers as follows by the Immigration Act of 1953 and the provisions of a prior law from those persons traveling in the third class and the restricted tourist class, who were the subjects of Decree of July 1917, and those whose names are not on that list and those whose names are not on that list. All reports upon the same manifests show when they travel in the same class and if they travel in different classes, appropriate cross references should be made on the manifests in which the respective names are found.

[illegible][illegible][illegible]

What term "Colored" refers to the Colored people (not Negroes).

What term

"Wax Indians" refers to the people of the West Indies about three or four centuries ago.

What term

"Colored Americans" refers to the people of America and South America of Spanish descent.

What term

"African Church" refers to the African Negro, whether coming from Africa or other countries of the West Indies, Negro or South American Nations, or Africa. And also the congregation of Black or the African Negro about the national Indian and other



(FOR THE IMMIGRATION AUTHORITIES)

Number

S. S.

19

## Sailing from

*[Illegible text]*

, 192-, Arriving at Port of

1944-1945

August 9, 1935; 192

-40-







Report on this form United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITY

Number

1

Amer.  
S.S. "TIVVIER"

sailing from PRO. BARRON, S.M.S.

August 2nd, 1935

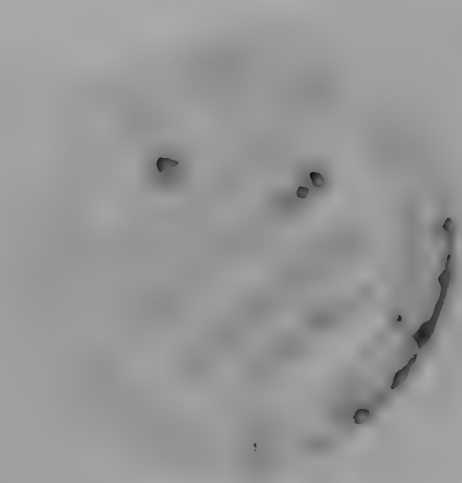
Arriving at Port of Philadelphia, Pa.

Aug. 19 35

| No. on List                                                           | Family Name   | Given Name   | Sex   | Age | Date of Birth        | Place of Birth         | Place of Residence                   |
|-----------------------------------------------------------------------|---------------|--------------|-------|-----|----------------------|------------------------|--------------------------------------|
| PASSENGERS EMPLOYED AT PHILADELPHIA, PA. - JULY 20th 1935 (Continued) |               |              |       |     |                      |                        |                                      |
| 1                                                                     | ASCHENBRENNER | HAROLD       | M     | 34  | P. S. Dec. 27th 1900 | Reading, Penna.        | 1916 Bondard St., Phila., Pa.        |
| 2                                                                     | AARFANG       | IRIE         | F     | 21  | P. S. Oct. 20th 1914 | Philadelphia, Pa.      | 1912 Spruce St., Philadelphia, Pa.   |
| 3                                                                     | BIDDER        | JOSE         | P. S. | 20  | July 10th 1915       | Archery, Penna.        | 2000 Van Buren St., Wilmington, Del. |
| 4                                                                     | COHR          | JOSEPH       | M     | 30  | P. S. July 14th 1905 | Philadelphia, Penna.   | 1723 Race St., Philadelphia, Pa.     |
| 5                                                                     | COHANE        | KIM          | P. S. | 44  | Sept. 13th 1900      | Lawrence, Kansas       | 3300 S. Juniper St., Phila., Pa.     |
| 6                                                                     | COBY          | ARTHUR       | M     | 20  | May 20th 1915        | San Francisco, Cal.    | 14 E. 16th St., New York, N.Y.       |
| 7                                                                     | COLOMBI       | LOUIS        | M     | 44  |                      |                        | 1000 Wilkins Ave., Pittsburgh, Pa.   |
| 8                                                                     | COLOMBI       | JOHN         | P. S. | 34  | Sept. 15th 1901      | Pittsburgh, Penna.     | 5404 Wilkins Ave., Pittsburgh, Pa.   |
| 9                                                                     | BARRELL       | CLAY         | M     | 20  | May 4th 1915         | Philadelphia, Penna.   | 4005 Springfield Ave., Phila., Pa.   |
| 10                                                                    | BRIDGEMAN     | CHARLES      | P. S. | 20  | July 3rd 1915        | Quincy, Illinois       | 1840 Delaware Av., Buffalo, N.Y.     |
| 11                                                                    | BRIDGEMAN     | WILLIAM      | P. S. | 18  | March 21st 1917      | Quincy, Illinois       | 1840 Delaware Av., Buffalo, N.Y.     |
| 12                                                                    | BROOKS        | AND          | P. S. | 20  | Dec. 2nd 1915        | Brooklyn, N.Y.         | 47 14th St., Brooklyn, N.Y.          |
| 13                                                                    | BROOKS        | EDWARD       | M     | 20  | Dec. 2nd 1915        | Atlantic City, N.J.    | 3756 S. Juniper St., Phila., Pa.     |
| 14                                                                    | CARRERA       | JOHN         | P. S. | 24  | Dec. 11th 1910       | New York, N.Y.         | 1415 64th St., Brooklyn, N.Y.        |
| 15                                                                    | FRANKE        | WALTER       | M     | 24  | Sept. 17th 1911      | Philadelphia, Penna.   | 1101 Penned St., Phila., Penna.      |
| 16                                                                    | FRANKE        | HAROLD       | M     | 20  | April 20th 1915      | Philadelphia, Penna.   | 1101 Penned St., Phila., Penna.      |
| 17                                                                    | FRANK         | WALTER       | M     | 40  | Feb. 20th 1900       | Haddon, N.J.           | 119 Windsor St., Haddonfield, N.J.   |
| 18                                                                    | FRANK         | ETHEL        | F     | 40  | Sept. 17th 1900      | Haddon, N.J.           | 119 Windsor St., Haddonfield, N.J.   |
| 19                                                                    | FRANK         | EDWARD       | P. S. | 18  | Oct. 20th 1915       | Haddonfield, N.J.      | 119 Windsor St., Haddonfield, N.J.   |
| 20                                                                    | SIMON         | JOSEPH       | M     | 24  | July 7th 1911        | Philadelphia, Penna.   | 1318 Winghooking St., Phila., Pa.    |
| 21                                                                    | SCHMIDT       | ELSI         | P. S. | 30  | March 31st 1905      | Phillipsburg, Penna.   | 271 S. 15th St., Philadelphia, Pa.   |
| 22                                                                    | SHIFFS        | HARRY L.     | M     | 43  | May 30th 1902        | Bordentown, N.J.       | Bordentown, N.J.                     |
| 23                                                                    | SHIFFS        | HARRY W.     | M     | 0   | Jan. 29th 1906       | Trenton, N.J.          | Bordentown, N.J.                     |
| 24                                                                    | VICKERY       | ARTHUR       | M     | 20  | Dec. 22nd 1905       | Philadelphia, Penna.   | 2430 N. 20th St., Philadelphia, Pa.  |
| 25                                                                    | CONRAD        | WILLIAM      | M     | 40  | Jan. 21st 1895       | Cleveland, Ohio        | 1525 E. 115th St., Cleveland, Ohio   |
| 26                                                                    | MUNGE         | JOSEPH       | M     | 30  | Oct. 27th 1905       | Las Marias, Porto Rico | 66-72 Leonard St., New York, N.Y.    |
| 27                                                                    | PECK          | HORACE       | M     | 43  | July 19th 1893       | New York, N.Y.         | 6380 N. 15th St., Philadelphia, Pa.  |
| 28                                                                    | PECK          | DOROTHY      | F     | 30  | June 4th 1897        | Morrisstown, N.J.      | 5320 N. 15th St., Philadelphia, Pa.  |
| 29                                                                    | PECK          | DOROTHY JEAN | F     | 7   | Dec. 5th 1934        | Guatemala City, Guat.  | 5320 N. 15th St., Philadelphia, Pa.  |

Registered with American Consul







Based on this blank United States citizenship and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and each citizen arriving at a port of continental United States from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITIES

Under

S. S. "ZIVVER"

sailing from PUERTO RICO, P.R.

AUGUST 30, 1935

19 35

Arriving at Port of Philadelphia, Pa.

AUGUST 30, 19 35

| NAME      | DATE OF BIRTH | AGE | SEX | DATE OF ARRIVAL | PLACE OF BIRTH     | PLACE OF RESIDENCE                  |
|-----------|---------------|-----|-----|-----------------|--------------------|-------------------------------------|
| FRANK     | 1897          | 38  | M   | Dec. 31st 1934  | Amherst, Mass.     | 1000 E. 10th St., Philadelphia, Pa. |
| FRANK     | 1905          | 30  | M   | Jan. 1st 1935   | Amherst, Mass.     | 1000 E. 10th St., Philadelphia, Pa. |
| PATTERSON | 1903          | 32  | M   | Mar. 1st 1935   | Springfield, Mass. | 400 Stage St., Newark, N.J.         |
| PATTERSON | 1904          | 31  | M   | Apr. 1st 1935   | Springfield, Mass. | 400 Stage St., Newark, N.J.         |
| PATTERSON | 1910          | 25  | M   | Feb. 1st 1935   | Springfield, Mass. | 400 Stage St., Newark, N.J.         |
| PATTERSON | 1911          | 24  | M   | Mar. 1st 1935   | Springfield, Mass. | 400 Stage St., Newark, N.J.         |
| FRANK     | 1902          | 33  | M   | Jan. 1st 1935   | Amherst, Mass.     | 1000 E. 10th St., Philadelphia, Pa. |
| FRANK     | 1903          | 32  | M   | Mar. 1st 1935   | Springfield, Mass. | 400 Stage St., Newark, N.J.         |

Lee B. Dolch  
12 BY IMMIGRANT INSPECTOR

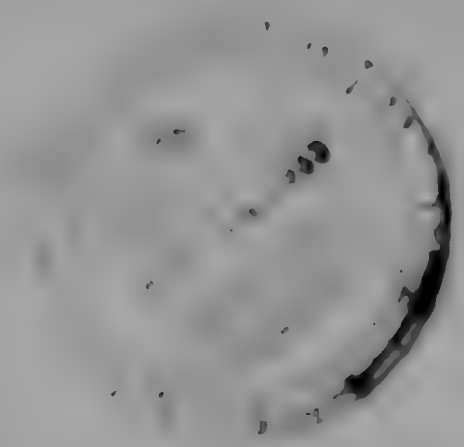
Paul Taylor  
Atty.



000000









REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. Twines arriving at the  
Port of Charleston, S. C. on Aug 9 1935

Nothing to Report.

1. *Interpretation* – this is the task of the researcher and takes the form of a series of sampling exercises of the domain content, using and refining the previously defined the language.

(C. A. James, Jr.)



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Voyage # 12

Diseases, injuries, births, and deaths during the voyage.

REPORT

S. S. *Divina*  
Arrived *Charleston S. C. Aug 19 1935*  
*A. A. J. Smith*  
*Ship's Surgeon*

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Form 562

## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1932.

### INSTRUCTIONS.

Transmission and method of report of ship, and others concerned.

Under the authority of section 1104 of the act of Congress of February 5, 1917, it is hereby directed that on the arrival of a ship having passengers from a foreign port to any port of the United States the ship's surgeon shall deliver in person to the United States Commissioner of Immigration, or his authorized representative, a complete report of the diseases (including manifestations of epidemic, typhoid, or infectious, injuries, births, and deaths) which have occurred among the passengers during the voyage.

Said report shall state in each instance the name of the passenger concerned, whether a first cabin, second cabin, or steerage passenger or stowaway; the latter or number used to designate the sheet of the passenger manifest on which the said passenger's name is to be found, and the number indicating the position of his name on said sheet, the nature of the disease or injury from which he is or has been suffering and his actual condition at the time of arrival (e. g., "improved," "recovered," "perished," "dead").

Under the heading "Remarks" the ship's surgeon will make such notations as "able to travel," "accompanied by family," "removed at quarantine," "removed at quarantine with family," "in ship's hospital," or other remarks which may be of assistance to the United States Immigration officers in protecting the welfare of the sick or in accounting for missing passengers.

Diseases and all other statements appearing in said report must be written legibly, but need not be in English if the ship's surgeon be more familiar with another language. The ship's surgeon shall furthermore declare on oath that to the best of his knowledge and belief the report, as herein prescribed, comprises a true and complete statement of all the diseases, injuries, births, and deaths which have occurred during the voyage.

The Commissioner of Immigration at the various ports of the United States have full authority to promulgate the detachment of the passengers from a ship until the ship's surgeon, or, in his stead, the master of the ship, shall have furnished a medical report, as herein indicated.

W. W. HUSBAND,  
Commissioner General of Immigration

Approved:  
JAMES J. DAVIS  
Secretary of Labor

### TRADUZIONE D'ISTRUZIONI

Ai Comandanti di nave, ai medici della nave, e agli altri interessati.

Secondo l'autorità del Congresso degli Stati Uniti, del 5 febbraio 1917, si è stabilito che quando una nave proveniente da un porto straniero arriva in un porto degli Stati Uniti, il medico della nave deve consegnare al Commisario dell'Immigrazione, o al suo rappresentante, un rapporto completo delle malattie, delle lesioni, dei nascimenti, e delle morti che si sono verificate tra i passeggeri durante il viaggio.

Tale rapporto deve contenere, in ogni caso, il nome del passeggero interessato, se si tratta di un passeggero di prima, seconda, o terza classe, o di un clandestino; il numero del foglio del manifesto sul quale il nome del detto passeggero è registrato; e la natura della malattia o dell'lesione, e la sua condizione al momento dell'arrivo (per esempio, "migliorato", "guarito", "morto", ecc.).

Sotto la rubrica "Note" il medico della nave farà le osservazioni che riterrà opportune, come, per esempio, "capace di viaggiare", "accompagnato dalla famiglia", "rimesso in quarantena", ecc.

Tutte le dichiarazioni contenute nel rapporto devono essere scritte in modo leggibile, ma non necessariamente in inglese.

Il Commisario dell'Immigrazione ha piena autorità di far sospendere l'ingresso dei passeggeri da una nave finché non sia stato ricevuto un rapporto medico come sopra indicato.

### UEBERSETZUNG DER INSTRUCTIONS

An die Kommandanten der Schiffe, die Ärzte der Schiffe, und die anderen Beteiligten.

Nach dem Befehl des Kongresses der Vereinigten Staaten vom 5. Februar 1917, wird bestimmt, dass ein Schiff, das von einem fremden Hafen nach einem Hafen der Vereinigten Staaten eintrifft, dem Kommissar der Immigration, oder seinem Vertreter, einen vollständigen Bericht über alle Krankheiten, Verletzungen, Geburten und Tode, die während der Reise unter den Passagieren vorgefallen sind, vorlegen muss.

Dieser Bericht muss in jedem Falle den Namen des betreffenden Passagiers enthalten, sowie, falls es sich um einen ersten, zweiten, dritten oder Steuerrahnpassagier handelt, die Nummer des Manifests, auf dem der Name des betreffenden Passagiers eingetragen ist, und die Natur der Krankheit oder Verletzung, sowie die tatsächliche Lage des Patienten zum Zeitpunkt der Ankunft (z. B., "verbessert", "genesen", "verstorben", etc.).

Unter der Überschrift "Bemerkungen" wird der Schiffsarzt solche Notizen machen können, wie, "fähig zu reisen", "begleitet von Familie", "in der Schiffsküche", etc.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Voyage # 12

S. S. *Granada* GRANADA

Sailing from *Alvaro Obregon, Mex.*

*Aug 6th*

*1935*, Arriving at Port of

*Philadelphia, Pa. August 12th, 1935*

| No.<br>on<br>List | NAME IN FULL |                 | AGE  |      | Sex | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES            |
|-------------------|--------------|-----------------|------|------|-----|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME      | Yrs. | Mon. |     |                      |                                                                                                                                           |                                                                                                               |                                     |
| 1                 | Brophy       | Anne P.         | ✓    | 30   | ✓   | F                    | June 2nd, 1905. Annapolis, Md.                                                                                                            | ✓                                                                                                             | Bala, Pa.                           |
| 2                 | nole         | Dorothy         | ✓    | 25   | ✓   | F                    | March 24, 1910 Philadelphia, Pa.                                                                                                          | ✓                                                                                                             | 810 Wywood Rd. Phila. Pa.           |
| 3                 | Harry        | C. P.           | ✓    | 51   | ✓   | M                    | Jan. 13, 1884 Norristown, Pa.                                                                                                             | ✓                                                                                                             | Norristown, Pa.                     |
| 4                 | Harry        | Lillian D.      | ✓    | 42   | ✓   | F                    | Sept. 6. 1893 Norristown, Pa.                                                                                                             | ✓                                                                                                             | "                                   |
| 5                 | Colgan       | Dr. John T.     | ✓    | 58   | ✓   | M                    | Oct. 6. 1876 Philadelphia, Pa.                                                                                                            | ✓                                                                                                             | 119 Maple Ave. Bala, Pa.            |
| 6                 | Colgan       | Eleanor Mae     | ✓    | 48   | ✓   | F                    | Sept. 1. 1887 Phila. Pa.                                                                                                                  | ✓                                                                                                             | "                                   |
| 7                 | Andreozzi    | Louis G.        | ✓    | 26   | ✓   | M                    | Nov. 6th, 1908 Brooklyn, NY.                                                                                                              | ✓                                                                                                             | 100 St. Johns Pl. Brooklyn, NY      |
| 8                 | Andreozzi    | Margaret        | ✓    | 22   | ✓   | F                    | March 12, 1912 Brooklyn, NY                                                                                                               | ✓                                                                                                             | "                                   |
| 9                 | Goldberg     | Max. P.         | ✓    | 46   | ✓   | M                    | Jan 18th, 1887 Phila. Pa.                                                                                                                 | ✓                                                                                                             | 300 Bala St. Phila. Pa.             |
| 10                | Goldberg     | Grace           | ✓    | 34   | ✓   | F                    | Aug. 1st, 1891 Phila. Pa.                                                                                                                 | ✓                                                                                                             | "                                   |
| 11                | Goldberg     | Charles         | ✓    | 37   | ✓   | M                    | Sept 8th, 1897 Brooklyn NY                                                                                                                | ✓                                                                                                             | 2nd Avenue St. Brooklyn NY          |
| 12                | Goldberg     | Max Lillian     | ✓    | 20   | ✓   | F                    | Oct 24th 1904 Brooklyn NY                                                                                                                 | ✓                                                                                                             | "                                   |
| 13                | Stevenson    | Margaret        | ✓    | 26   | ✓   | F                    | July 21, 1908 Phila. Pa.                                                                                                                  | ✓                                                                                                             | 924 E. 21st St. Phila. Pa.          |
| 14                | Connett      | Marion          | ✓    | 39   | ✓   | F                    | Feb 14th. 1896 Washington DC                                                                                                              | ✓                                                                                                             | 2111 14th St. Washington DC         |
| 15                | Braun        | Walter          | ✓    | 44   | ✓   | M                    | Feb 17, 1901 New York, NY                                                                                                                 | ✓                                                                                                             | 512 West 10th St. New York NY       |
| 16                | Fleming      | Willie M.       | ✓    | 38   | ✓   | F                    |                                                                                                                                           | ✓                                                                                                             | NY County Pa. New York NY           |
| 17                | Brophy       | Charles P.      | ✓    | 31   | ✓   | M                    | Sept. 2nd, 1904 Phila. Pa.                                                                                                                | ✓                                                                                                             | 5124 E. 21st St. Phila. Pa.         |
| 18                | Banta        | James P.        | ✓    | 37   | ✓   | M                    | Nov. 7, 1897 Phila. Pa.                                                                                                                   | ✓                                                                                                             | 4828 Chestnut St. Phila. Pa.        |
| 19                | Harriet      | Richard English | ✓    | 35   | ✓   | M                    | Feb 20. 1899 Baltimore, Md.                                                                                                               | ✓                                                                                                             | 9 Baltimore Ave. Baltimore Md.      |
| 20                | Harriet      | Carl M.         | ✓    | 26   | ✓   | F                    | Oct. 4th. 1908 New Brunswick, NJ                                                                                                          | ✓                                                                                                             | "                                   |
| 21                | Shenard      | Harriet C.      | ✓    | 27   | ✓   | F                    | Sept 11th 1907 Pittsburgh Pa.                                                                                                             | ✓                                                                                                             | 4305 Baltimore Ave. Pittsburgh, Pa. |
| 22                | Arbogast     | John            | ✓    | 28   | ✓   | F                    | Feb 2. 1916 Phila. Pa.                                                                                                                    | ✓                                                                                                             | 1000 Chestnut St. Phila. Pa.        |
| 23                | Reinhardt    | Isabel          | ✓    | 28   | ✓   | M                    | Dec 20. 1906 Phila. Pa.                                                                                                                   | ✓                                                                                                             | Salisbury, Pa.                      |
| 24                | Aufawohl     | John M.         | ✓    | 44   | ✓   | M                    | Sept 8th 1901 Rochester, NY                                                                                                               | ✓                                                                                                             | 22 Niagara St. Rochester NY         |
| 25                | Walters      | Emil            | ✓    | 23   | ✓   | M                    | June 24 1911 Phila. Pa.                                                                                                                   | ✓                                                                                                             | 2020 E. 4th St. Phila. Pa.          |
| 26                | Ottell       | Jane            | ✓    | 23   | ✓   | F                    | Sept 2nd, 1911 Phila. Pa.                                                                                                                 | ✓                                                                                                             | 2100 E. 4th St. Phila. Pa.          |
| 27                | De Benedicte | Marj            | ✓    | 18   | ✓   | F                    |                                                                                                                                           | ✓                                                                                                             | 200 Baltimore St. Baltimore Md.     |
| 28                | Ward         | Catherine       | ✓    | 30   | ✓   | F                    | Jan 10th 1905 N.Y.C.                                                                                                                      | ✓                                                                                                             | 20 St. Marks St. New York NY        |







**LIST OF UNITED STATES CITIZENS**  
(FOR THE IMMIGRATION AUTHORITIES)

Voyage 12.

Sailing from ALVARO OBREGON, MEX, Aug 6 1935, 19  , Arriving at Port of Philadelphia Aug 12th 19  

| No.<br>ON<br>LIST. | NAME IN FULL                                   |                 | AGE  |      | SEX | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES         |
|--------------------|------------------------------------------------|-----------------|------|------|-----|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------|
|                    | FAMILY NAME.                                   | GIVEN NAME.     | Yrs. | Mos. |     |                      |                                                                                                                                           |                                                                                                               |                                  |
| 1                  | Hayward                                        | James P.        | ✓    | 27   | M   | S                    |                                                                                                                                           | (Father.<br>1914 Pittsburgh Pa. due to Naturalization of                                                      | 182 Coolidge Ave., Abasco, N.J.  |
| 2                  | Iack                                           | H. Lawrence Jr. | ✓    | 27   | M   | S                    | Feb 19, 1906 New Brunswick, N.J.                                                                                                          |                                                                                                               | 12 Huntington St., New Brunswick |
| 8                  | Willcox                                        | Charles Percy   | ✓    | 68   | M   | M                    | June 2 1867 Glenn Mills Penn                                                                                                              |                                                                                                               | 1812 Spruce St. Phila Pa.        |
| 4                  | Willcox                                        | Edna G.         | ✓    | 68   | F   | M                    | June 18th, 1872 Green Bay Wis.                                                                                                            |                                                                                                               | "                                |
| 5                  | Weintraub                                      | Ida             | ✓    | 33   | F   | S                    |                                                                                                                                           | Delaware County Court Pa. 1907                                                                                | Salmon, Upper Merion, Pa.        |
| 6                  | Plumberg                                       | Agnes A.        | ✓    | 26   | F   | S                    | April 2 1909 Baltimore Md.                                                                                                                |                                                                                                               | 2417 N. Baltimore St. Balto. Md. |
| 7                  | Brockenridge<br>Cruise Director, Cruise Staff. | Russell         | ✓    | 21   | M   | S                    | Jan. 1st. 1914. Kansas City Mo.                                                                                                           |                                                                                                               | Univ. Va. Charlottesville, Va.   |

7-10-1961

DOI: 10.1002/ps.2222

The name is

Prof. H. H. H.

Fig. 4.  $\Delta T$  vs.  $\Delta t$ .

124

*[Faint handwritten text, possibly "I have been thinking"]*







U S DEPARTMENT OF LABOR

AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
years' experience as a Physician  
and that I have made a personal examination of  
each of the aliens named herein and that the foregoing List and Manifest Sheet is  
in number \_\_\_\_\_

Form 100  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. *Seneca* "GRANADA" arriving at the  
Port of Philadelphia, Pa. ON August 12th, 1935 19

| NAME | AGE | SEX | NATIVITY | DATE OF BIRTH | PLACE OF BIRTH | DATE OF ARRIVAL | PLACE OF ARRIVAL |
|------|-----|-----|----------|---------------|----------------|-----------------|------------------|
|------|-----|-----|----------|---------------|----------------|-----------------|------------------|

None

None

None

To the U. S. Commissioner of Immigration

I hereby certify that the foregoing is a true and correct copy of the original report of the Surgeon of the vessel, and that the same has been examined and found correct by me.

Wm. H. H. H.



I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_ years' experience as a Physician  
\_\_\_\_\_, and that I have made a personal examination of \_\_\_\_\_

Form 312

U. S. DEPARTMENT OF LABOR

IMMIGRATION SERVICE

S. N. "GRADUA "

Admitted August 12th, 1926

*James Henry Day*

*Chief Surgeon*

REPORT

103

Diseases, Injuries, Births, and Deaths during the year.

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1922.

## INSTRUCTIONS.

[illegible]

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## TRANSMISSION OF INFECTIONS

1. The Commission has received a number of requests for information regarding the activities of the Commission and the results of its work. The Commission has endeavored to provide the information requested in a timely and complete manner. The Commission has also received a number of requests for information regarding the activities of the Commission and the results of its work. The Commission has endeavored to provide the information requested in a timely and complete manner.

## TRADUZIONI E INNOVAZIONI

Uppmannede till 1000 personer och 1000000 kronor



Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

There are possibly two different models for the spread of new plant species and the formation of new species. The gradual model is based upon the theory of the species curve, the mutation frequency is assumed to be constant and the number of new species increases slowly.

[illegible]



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This yellow sheet is for the listing of

3511

Br. S. S. New York City. Passengers sailing from Fowey, England, July 31, 1935

| 1           | 2                                                                     | 3                                      | 4                | 5   | 6                 | 7                     | 8                                        | 9                                                  | 10             | 11                                                                  | 12                                                                     | 13                   | 14                                                             | 15                                                                            |
|-------------|-----------------------------------------------------------------------|----------------------------------------|------------------|-----|-------------------|-----------------------|------------------------------------------|----------------------------------------------------|----------------|---------------------------------------------------------------------|------------------------------------------------------------------------|----------------------|----------------------------------------------------------------|-------------------------------------------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL<br>Family name Given name | Age<br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to<br>Read Write Understand English | Nationality<br>Country of which citizen or subject | Race or people | Place of birth<br>Country City or town, State, Province or District | Immigration Visa, Passport Visa, or Entry Permit<br>Number Date issued | Issued<br>Place Date | Date concerning<br>verification of<br>last permanent residence | Last permanent residence<br>Country City or town, State, Province or District |
| 1           | 6                                                                     | JONES                                  | 20               | M   | Single            | Student               | Yes                                      | English                                            | Welsh          | Wales, Glamorgan                                                    | -                                                                      | -                    | -                                                              | England, London                                                               |
| 2           | 8                                                                     | BROWN                                  | 20               | F   | Single            | Student               | Yes                                      | English                                            | Welsh          | Wales, Glamorgan                                                    | -                                                                      | -                    | -                                                              | England, London                                                               |
| 3           | 8                                                                     | HILL                                   | 15               | M   | Single            | Student               | Yes                                      | English                                            | Welsh          | Wales, Glamorgan                                                    | -                                                                      | -                    | -                                                              | England, London                                                               |
| 4           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 5           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 6           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 7           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 8           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 9           |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 10          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 11          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 12          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 13          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 14          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 15          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 16          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 17          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 18          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 19          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 20          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 21          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 22          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 23          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 24          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 25          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 26          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |
| 27          |                                                                       |                                        |                  |     |                   |                       |                                          |                                                    |                |                                                                     |                                                                        |                      |                                                                |                                                                               |

3 other passengers  
no visas  
all passengers  
all passengers  
all passengers

See file 4399  
53

Released by BSI to branch with ship as non immigrant alien to land to Eng  
Jok 1/2/36



The entries on this sheet must be typewritten or printed.

STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

Arriving at Port of Philadelphia, Pa. , August 15 , 1935

| 16          | 17                                                                                                                                                         | 18                | 19                                                | 20                        | 21                                                    | 22                                                                   | 23                                                                                                              | 24                                 | 25                   | 26                   | 27                                            | 28                                   | 29                                | 30                                    | 31                                           | 32                                           | 33                                       | 34                                                     | 35     | 36       | 37                      |    |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------|---------------------------|-------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|-----------------------------------------------|--------------------------------------|-----------------------------------|---------------------------------------|----------------------------------------------|----------------------------------------------|------------------------------------------|--------------------------------------------------------|--------|----------|-------------------------|----|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none these, then in country of which a citizen or subject. | Final destination | Whether having a ticket to such final destination | By whom was passage paid? | Whether in possession of \$50, and if less, how much? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend, state name and complete address, and if relative exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization | Whether a member of a secret society | Whether a member of a labor union | Whether a member of a political party | Whether a member of a religious organization | Whether a member of a fraternal organization | Condition of health, mental and physical | Deformed or crippled Nature, length of time, and cause | Height | Color of | Marks of identification |    |
|             |                                                                                                                                                            | Country           |                                                   |                           |                                                       | State                                                                |                                                                                                                 | City or town                       |                      |                      |                                               |                                      |                                   |                                       |                                              |                                              |                                          |                                                        | Yes    |          |                         | No |
| 1           | Frederick W. Humphrey Jones, London, Eng.                                                                                                                  | -                 | -                                                 | Free                      | -                                                     | -                                                                    | -                                                                                                               | None                               | -                    | -                    | -                                             | -                                    | -                                 | -                                     | -                                            | -                                            | -                                        | -                                                      | 5      | 2        | Light Brown             | -  |
| 2           | Frederick W. Humphrey Jones, London, Eng.                                                                                                                  | -                 | -                                                 | "                         | Yes                                                   | -                                                                    | -                                                                                                               | None                               | -                    | -                    | -                                             | -                                    | -                                 | -                                     | -                                            | -                                            | -                                        | -                                                      | 5      | 2        | Light Brown             | -  |
| 3           | Frederick W. Humphrey Jones, London, Eng.                                                                                                                  | -                 | -                                                 | "                         | Yes                                                   | -                                                                    | -                                                                                                               | None                               | -                    | -                    | -                                             | -                                    | -                                 | -                                     | -                                            | -                                            | -                                        | -                                                      | 5      | 2        | Light Brown             | -  |



...s, or a part of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

List

The entries on this sheet must be typewritten or printed.

[illegible]







10. 11. 19

(FOR THE IMMIGRATION AUTHORITIES.)

S. S.

*sailing from* **Las Piedras Venezuela**

126 7

, 1935

*, Arriving at Port of*

Philadelphia Pa Aug 15

1935

Philip E.

40

W S. 5/26/87 Marinette Wis

22 Jan = 1230

March 13-1880

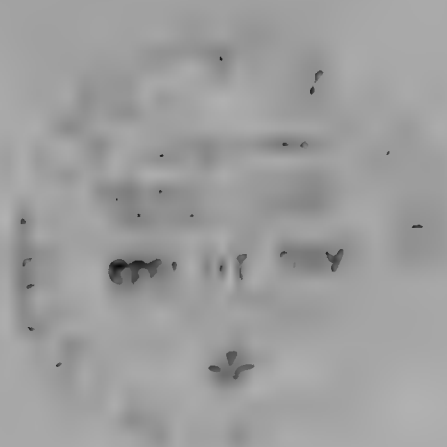
441 So. Van. Buren street  
Green Bay Wis

*L. L. Gehzen admitted  
James Stewart  
W. C. DEURMAN INSPECTOR*

W. H. Russell  
- of -



OUR POINT 20 8 A E T Y





Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

### LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

for S. S.

U.S.S. 100

sailing from San Blas, Vera Cruz, Mexico, August 3, 1935, Arriving at Port of Philadelphia, Pa., August 16, 1935

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES OR INSULAR POSSESSION OR IF NATIVE OF A COUNTRY OF WHICH THE UNITED STATES HAS JURISDICTION, GIVE NAME AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND PLACE OF BIRTH OF COUNTRY WHERE ISSUED NATURALIZATION PAPERS AND DATE OF ISSUANCE | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                                                                                                                                                                             |                                                                                                                 |                          |

|    |             |     |     |     |     |     |     |
|----|-------------|-----|-----|-----|-----|-----|-----|
| 1  | JOHN J. ... | ... | ... | ... | ... | ... | ... |
| 2  | ...         | ... | ... | ... | ... | ... | ... |
| 3  | ...         | ... | ... | ... | ... | ... | ... |
| 4  | ...         | ... | ... | ... | ... | ... | ... |
| 5  | ...         | ... | ... | ... | ... | ... | ... |
| 6  | ...         | ... | ... | ... | ... | ... | ... |
| 7  | ...         | ... | ... | ... | ... | ... | ... |
| 8  | ...         | ... | ... | ... | ... | ... | ... |
| 9  | ...         | ... | ... | ... | ... | ... | ... |
| 10 | ...         | ... | ... | ... | ... | ... | ... |
| 11 | ...         | ... | ... | ... | ... | ... | ... |
| 12 | ...         | ... | ... | ... | ... | ... | ... |
| 13 | ...         | ... | ... | ... | ... | ... | ... |
| 14 | ...         | ... | ... | ... | ... | ... | ... |
| 15 | ...         | ... | ... | ... | ... | ... | ... |
| 16 | ...         | ... | ... | ... | ... | ... | ... |
| 17 | ...         | ... | ... | ... | ... | ... | ... |
| 18 | ...         | ... | ... | ... | ... | ... | ... |
| 19 | ...         | ... | ... | ... | ... | ... | ... |
| 20 | ...         | ... | ... | ... | ... | ... | ... |
| 21 | ...         | ... | ... | ... | ... | ... | ... |
| 22 | ...         | ... | ... | ... | ... | ... | ... |
| 23 | ...         | ... | ... | ... | ... | ... | ... |
| 24 | ...         | ... | ... | ... | ... | ... | ... |
| 25 | ...         | ... | ... | ... | ... | ... | ... |
| 26 | ...         | ... | ... | ... | ... | ... | ... |
| 27 | ...         | ... | ... | ... | ... | ... | ... |
| 28 | ...         | ... | ... | ... | ... | ... | ... |
| 29 | ...         | ... | ... | ... | ... | ... | ... |
| 30 | ...         | ... | ... | ... | ... | ... | ... |
| 31 | ...         | ... | ... | ... | ... | ... | ... |
| 32 | ...         | ... | ... | ... | ... | ... | ... |
| 33 | ...         | ... | ... | ... | ... | ... | ... |
| 34 | ...         | ... | ... | ... | ... | ... | ... |
| 35 | ...         | ... | ... | ... | ... | ... | ... |
| 36 | ...         | ... | ... | ... | ... | ... | ... |
| 37 | ...         | ... | ... | ... | ... | ... | ... |
| 38 | ...         | ... | ... | ... | ... | ... | ... |
| 39 | ...         | ... | ... | ... | ... | ... | ... |
| 40 | ...         | ... | ... | ... | ... | ... | ... |
| 41 | ...         | ... | ... | ... | ... | ... | ... |
| 42 | ...         | ... | ... | ... | ... | ... | ... |
| 43 | ...         | ... | ... | ... | ... | ... | ... |
| 44 | ...         | ... | ... | ... | ... | ... | ... |
| 45 | ...         | ... | ... | ... | ... | ... | ... |
| 46 | ...         | ... | ... | ... | ... | ... | ... |
| 47 | ...         | ... | ... | ... | ... | ... | ... |
| 48 | ...         | ... | ... | ... | ... | ... | ... |
| 49 | ...         | ... | ... | ... | ... | ... | ... |
| 50 | ...         | ... | ... | ... | ... | ... | ... |

(1) - U.S. Citizen admitted  
James H. ...  
U.S. IMMIGRANT INSPECTOR



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S.

WILSON

sailing from

Las Piedras, Vera. Cr.

August 3,

1935

Arriving at Port of

Philadelphia, Pa., August 15

1935

| List | NAME IN FULL |            | AGE  |      | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF ENTRY | ADDRESS IN UNITED STATES |
|------|--------------|------------|------|------|-----|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------|
|      | FAMILY NAME  | GIVEN NAME | Yrs. | Mos. |     |                                                                                                                                    |                                                                                                      |                          |
| 1    | WILSON       | ARTHUR E.  | 42   | 2    | M   | born in England                                                                                                                    | Can. 3-11-14, N.Y. N.Y. Dist. Ct. N.Y. No. 27, 1914, 1-5-13-5-6-51 N.Y.                              |                          |
| 2    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 3    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 4    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 5    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 6    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 7    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 8    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 9    |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 10   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 11   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 12   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 13   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 14   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 15   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 16   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 17   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 18   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 19   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 20   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 21   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 22   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 23   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 24   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 25   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 26   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 27   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 28   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 29   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 30   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 31   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 32   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 33   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 34   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 35   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 36   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 37   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 38   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 39   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 40   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 41   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 42   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 43   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 44   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 45   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 46   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 47   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 48   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 49   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |
| 50   |              |            |      |      |     |                                                                                                                                    |                                                                                                      |                          |

One (1) U.S. Citizen admitted  
Samuel Horowitz  
U. S. IMMIGRANT INSPECTOR



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

### LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S.

W. L. G. A. E.

sailing from Las Palmas, Vire, a

August 9,

1935

Arriving at Port of

Philadelphia, Pa., August 16,

1935

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES OR INSULAR POSSESSION OR IF NATIVE OF FOREIGN COUNTRY, GIVE DATE AND PLACE OF BIRTH, CITY OR TOWN AND STATE. | IF NATURALIZED, GIVE NAME AND DATE OF CITIZENSHIP, AND DATE OF PASSPORT. | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                                                                                                                                         |                                                                          |                          |

|   |                |                |    |   |                     |                |                                    |
|---|----------------|----------------|----|---|---------------------|----------------|------------------------------------|
| 1 | W. L. G. A. E. | W. L. G. A. E. | 41 | M | Las Palmas, Vire, a | August 9, 1935 | Philadelphia, Pa., August 16, 1935 |
|---|----------------|----------------|----|---|---------------------|----------------|------------------------------------|

*Ex (1) U.S. Citizens admitted to land Honorary*  
BY ST. IMMIGRANT INSPECTOR







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number

Nr

STEEL MOTORSHIP "TOLEDO"

sailing from

BERGEN, NORWAY

JULY 30TH

1935

Arriving at Port of

PHILA

SAVANNAH, GA.

August 16, 1935

| No.<br>and<br>List | NAME IN FULL |                | AGE  |      | Sex | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                                          |
|--------------------|--------------|----------------|------|------|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
|                    | FAMILY NAME  | GIVEN NAME     | Yrs. | Mos. |     |                      |                                                                                                                                         |                                                                                                            |                                                                                   |
| 1                  | LITTON       | GEORGE EMILE   | 25   | 9    | M   | 0                    | PITTSBURG, PA; MAY 27TH 1906                                                                                                            | Home to Savannah, Ga.                                                                                      | CAPTAIN AND ADJ. COMMANDER OF<br>FORT'S QUINCY MILITARY SCHOOL<br>CENTRAL, U.S.A. |
| 2                  | SALZER       | GEORGE C.      | 16   | 7    | M   | 0                    | WILMINGTON, DELAWARE, JANUARY 14TH 1917                                                                                                 | U.S. passport # 177584 issued 2/10/35                                                                      | NEWBORN, U.S.A.                                                                   |
| 3                  | LAINO        | WILLIAM HANNEY | 19   | 2    | M   | 0                    | EUREKA, CALIF; JUNE 2ND 1916                                                                                                            | U.S. passport # 109104 issued 6/10/35                                                                      | MONTGOMERY, U.S.A.                                                                |
| 4                  | PERRO        | GEORGE FANETTE | 40   | 40   | M   | 0                    | QUINCY, MASS. AUGUST 30TH 1895                                                                                                          | U.S. passport # 177584 issued 2/10/35                                                                      | 50 LEXTON ST. EAST WILTON, MASS.                                                  |
| 5                  | JENNINGS     | WILLIAM WITT   | 17   | 8    | M   | 0                    | RICHMOND, VA. NOVEMBER 23RD 1917                                                                                                        | U.S. passport # 177584 issued 2/10/35                                                                      | OLEN PERRIS, U.S.A.                                                               |
| 6                  | SHAW         | LOUISE S.      | 35   | 5    | F   | 0                    | SAVANNAH, GA; FEBRUARY 8TH 1900                                                                                                         | NO. 222005 FEBRUARY 17, 1927<br>U.S. DISTRICT COURT SOUTHERN DISTRICT OF GA. SAVANNAH, GA.                 | 200 ATLANTIC AVE.<br>SAVANNAH, GA.                                                |
| 7                  | SHAW         | MRS. GEORGE    | 12   | 1    | M   | 0                    | SAVANNAH, GA; JUNE 21ST 1923                                                                                                            | Home to Savannah, Ga.                                                                                      |                                                                                   |

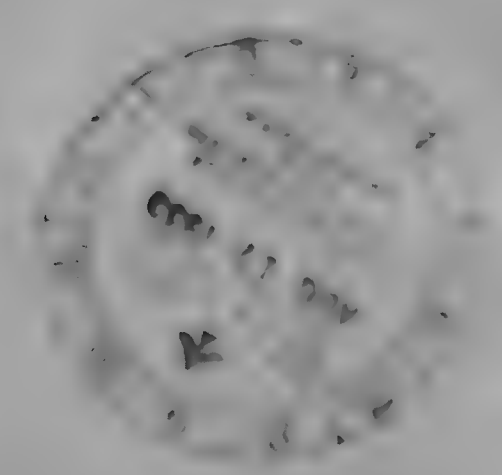
H. W. S. Chappas (Line 2, 3, 506)  
admitted since 1917  
since 1917 for people with respect to Savannah  
Savannah  
U.S. IMMIGRANT INSPECTOR

10/10/35



1. Name of the person  
2. Address  
3. City  
4. State  
5. Zip

1. Name of the person  
2. Address  
3. City  
4. State  
5. Zip





Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a part of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a part of continental United States, or a part of another insular possession.

Number 1.

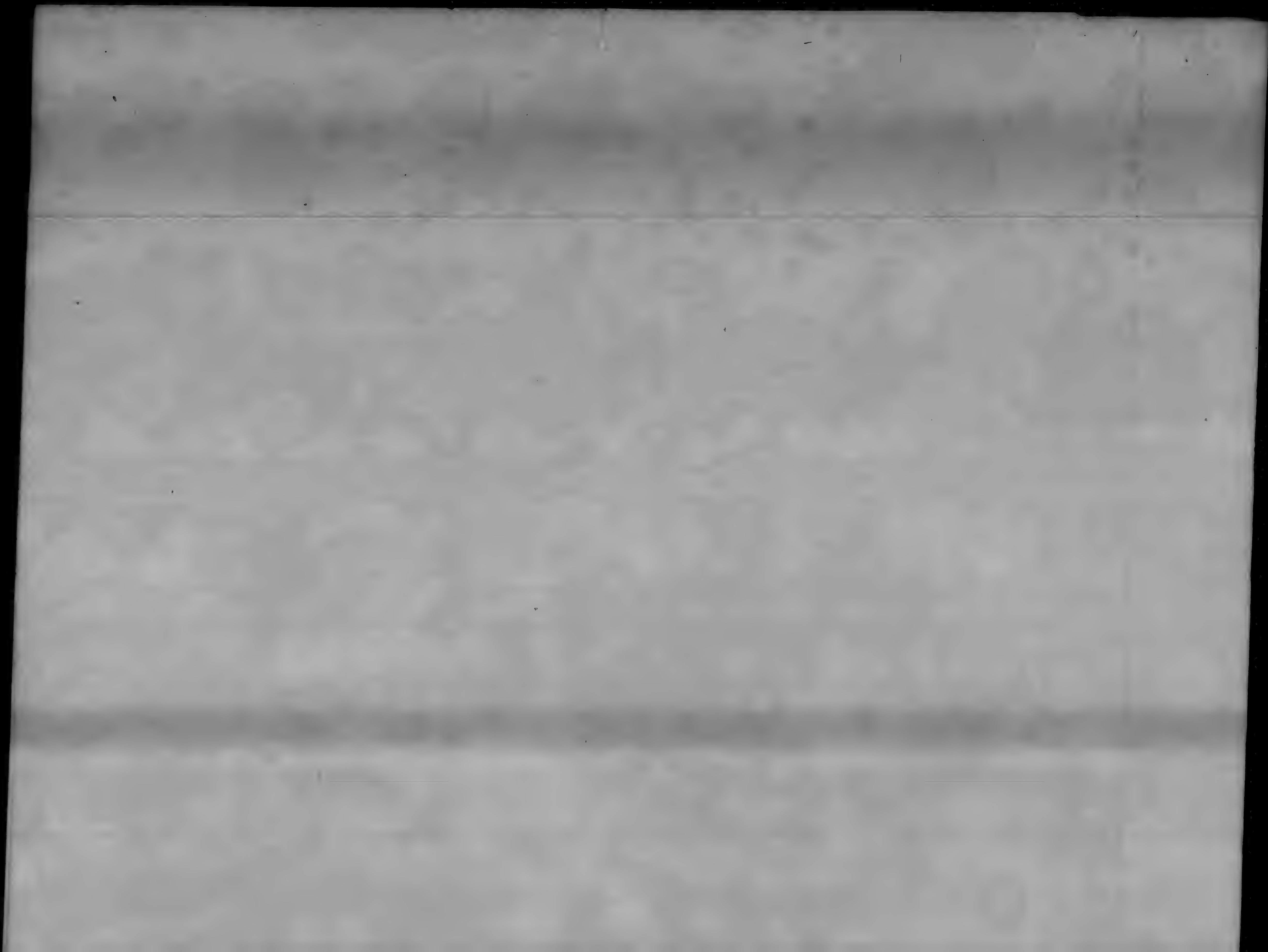
## LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Ame S. S. "CARRILLO" sailing from PHILADELPHIA, PA. AUGUST 5, 1935, Arriving at Port of PHILADELPHIA, PA. AUGUST 18, 1935  
via Christian, P.O.

| No. on List | NAME IN FULL |              | AGE  |      | SEX | MARRIED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                                                                     |
|-------------|--------------|--------------|------|------|-----|-------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
|             | FAMILY NAME  | GIVEN NAME   | Yrs. | Mon. |     |                   |                                                                                                                                    |                                                                                                        |                                                                                              |
| 1           | ABRAMSON     | BERT         | 45   |      | F   | W                 | Worcester, Mass.                                                                                                                   | March 3, 1900                                                                                          | 1932 Locust St, Philadelphia, Pa.                                                            |
| 2           | ASHTON       | EMMA L.      | 27   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | April 1, 1908                                                                                          | 5503 Germantown Av, Philadelphia, Pa.                                                        |
| 3           | BATES        | ADELAIDE R.  | 31   |      | F   | S                 | Reading, Pa.                                                                                                                       | May 3, 1904                                                                                            | 1020 N. 4th St, Reading, Pa.                                                                 |
| 4           | CANTLIN      | HELEN C.     | 37   |      | F   | W                 | Philadelphia, Pa.                                                                                                                  | September 4, 1898                                                                                      | 1721 Moore St, Philadelphia, Pa.                                                             |
| 5           | GERSHEN      | HERMAN       | 33   |      | M   | S                 | Philadelphia, Pa.                                                                                                                  | January 3, 1903                                                                                        | 5722 Greene St, Philadelphia, Pa.                                                            |
| 6           | GOEHL        | PAULINE E.   | 34   |      | F   | S                 | Washington, D.C.                                                                                                                   | August 12, 1904                                                                                        | 36 Montgomery Av, Kensington, Md.                                                            |
| 7           | HASSLER      | ISABEL T.    | 24   |      | F   | M                 | Wodepeck, Pa.                                                                                                                      | November 5, 1910                                                                                       | 5503 Germantown, Av, Philadelphia, Pa.                                                       |
| 8           | JACKSON      | MARY C.      | 43   |      | F   | S                 | Cleveland, Ohio                                                                                                                    | February 11, 1892                                                                                      | 1290 Delaware Av, Buffalo, N.Y.                                                              |
| 9           | KILLIAN      | DOROTHY M.   | 29   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | October 16, 1906                                                                                       | 5734 Oxford St, Philadelphia, Pa.                                                            |
| 10          | LEWNECKE     | MARGOT       | 44   |      | F   | W                 |                                                                                                                                    | County Court, Hackensack, N.J.<br>October 2, 1931                                                      | 395 Palisade Av, Union City, N.J.<br>Av, New York, N.Y.<br>Amherst Club, 36th St & Lexington |
| 11          | LEONARD      | EDWIN        | 64   |      | M   | W                 | So. Dartmouth, Mass.                                                                                                               | July 10, 1871                                                                                          | 91 Highgate Av, Buffalo, N.Y.                                                                |
| 12          | LIVINGSTON   | ALICE M.     | 25   |      | F   | S                 | Brooklyn, N.Y.                                                                                                                     | March 7, 1909                                                                                          | 9 Carmel Rd, Buffalo, N.Y.                                                                   |
| 13          | MC CLOY      | JESSIE P.    | 45   |      | F   | W                 | Little Falls, N.Y.                                                                                                                 | April 23, 1890                                                                                         | 116 Simpson Rd, Ardmore, Pa.                                                                 |
| 14          | MURPHY       | HELEN M.     | 33   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | May 30, 1902                                                                                           | 6321 Gantz Av, Philadelphia, Pa.                                                             |
| 15          | MURRAY       | WILLIAM S.   | 40   |      | M   | W                 | Philadelphia, Pa.                                                                                                                  | October 21, 1895                                                                                       | with Husband above.                                                                          |
| 16          | MURRAY       | VIOLET R.    | 41   |      | F   | M                 | Philadelphia, Pa.                                                                                                                  | August 29, 1894                                                                                        | 143 So. 55th St, Philadelphia, Pa.                                                           |
| 17          | OLSON        | ADELAIDE     | 25   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | May 13, 1907                                                                                           | 201 West State St, Trenton, N.J.                                                             |
| 18          | PETTY        | NELSON       | 66   |      | M   | W                 | Cranberry, N.J.                                                                                                                    | August 7, 1869                                                                                         | with Husband above                                                                           |
| 19          | PETTY        | MATILDA P.   | 63   |      | F   | M                 | Emmettsburg, Md.                                                                                                                   | February 23, 1872                                                                                      | 6311 Spruce St, Philadelphia, Pa.                                                            |
| 20          | REID         | CATHERINE    | 31   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | November 6, 1904                                                                                       | 5935 Webster St, Philadelphia, Pa.                                                           |
| 21          | SILVERSTEIN  | JENNIE       | 24   |      | F   | S                 | Philadelphia, Pa.                                                                                                                  | January 11, 1911                                                                                       | 1736 Columbus Rd, N.W. Washington, D.C.                                                      |
| 22          | STERN        | GERTRUDE     | 60   |      | F   | S                 | Washington, D.C.                                                                                                                   | September 18, 1875                                                                                     | with Sister above.                                                                           |
| 23          | STERN        | WIVIFRED     | 52   |      | F   | S                 | Washington, D.C.                                                                                                                   | December 31, 1882                                                                                      | 32 Highgate Av, Buffalo, N.Y.                                                                |
| 24          | STYAND       | JANE A.      | 25   |      | F   | S                 | Buffalo, N.Y.                                                                                                                      | December 27, 1909                                                                                      | 86 South 13 St, Newark, N.J.                                                                 |
| 25          | AMERN        | CORNELIUS J. | 44   |      | M   | S                 | New York, N.Y.                                                                                                                     | September 4, 1890                                                                                      | 32 Inlet Ter. Belmar, N.J.                                                                   |
| 26          | BENNETT      | DOROTHY J.   | 24   |      | F   | S                 | Newark, N.J.                                                                                                                       | May 31, 1911                                                                                           | 120 E. North Av, North Side, Pittsburgh, Pa.                                                 |
| 27          | BULFORD      | DOROTHY E.   | 26   |      | F   | S                 | Pittsburgh, Pa.                                                                                                                    | April 20, 1909                                                                                         | 1436 Cayuga St, Philadelphia, Pa.                                                            |
| 28          | ECKEL        | HESSKILL     | 49   |      | M   | W                 | Philadelphia, Pa.                                                                                                                  | March 30, 1889                                                                                         | with Husband above.                                                                          |
| 29          | ECKEL        | CHARLOTTE    | 46   |      | F   | M                 | Philadelphia, Pa.                                                                                                                  | February 24, 1889                                                                                      | 335 N. Lansdowne Av, Lansdowne, Pa.                                                          |
| 30          | COV          | ARTHUR S.    | 42   |      | M   | W                 | Upson, Wis.                                                                                                                        | December 16, 1892                                                                                      |                                                                                              |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

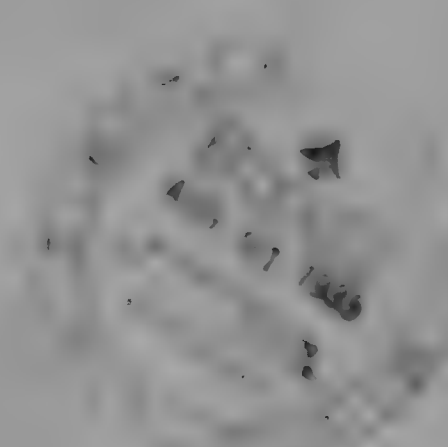
Number **2.**

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

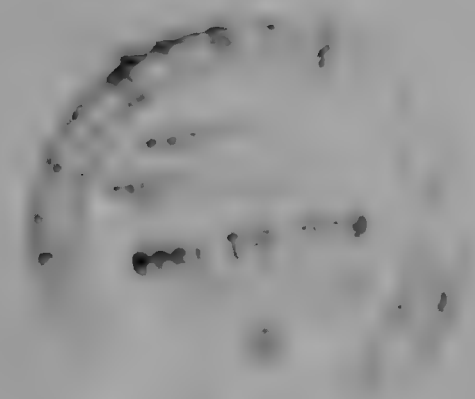
*Ames*  
S. S. "CARRILLO" sailing from **BARRIOS GUATEMALA**, **AUGUST 12,** **1935**, Arriving at Port of **PHILADELPHIA 7. PA. AUGUST 18, 1935**  
*viz Charleston, S.C.*

| No.<br>on<br>List | NAME IN FULL |             | AGE | SEX | MARRIED OR<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES            |
|-------------------|--------------|-------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME  |     |     |                      |                                                                                                                                          |                                                                                                             |                                     |
| 1                 | GOW          | LILA        | 40  | F   | M                    | Bridgewater, Mass.                                                                                                                       | November 26, 1894                                                                                           | 335 W. Lansdowne Av, Lansdowne, Pa. |
| 2                 | KIRK         | ANNA M.     | 52  | F   | M                    | Bordentown, N.J.                                                                                                                         | June 9, 1883                                                                                                | 514 - 4th Av, Asbury Park, N.J.     |
| 3                 | KIRK         | ROBERT E.   | 9   | M   | S                    | Spring Lake, N.J.                                                                                                                        | February 16, 1926                                                                                           | with Mother above.                  |
| 4                 | PFLOMM       | ELLIOTT R.  | 40  | M   | M                    | New York, N.Y.                                                                                                                           | September 1, 1904                                                                                           | 673 East 22 St, Brooklyn, N.Y.      |
| 5                 | PFLOMM       | HAZEL       | 30  | F   | M                    | Bridgeport, Conn.                                                                                                                        | January 11, 1896                                                                                            | with Husband above                  |
| 6                 | POOR         | VIRGINIA T. | 32  | F   | S                    | Garrison, Md.                                                                                                                            | October 3, 1902                                                                                             | 3419 Oakenshaw Pl, Baltimore, Md.   |

*2 more omitted 8/5/35*  
*See above*  
*noted*





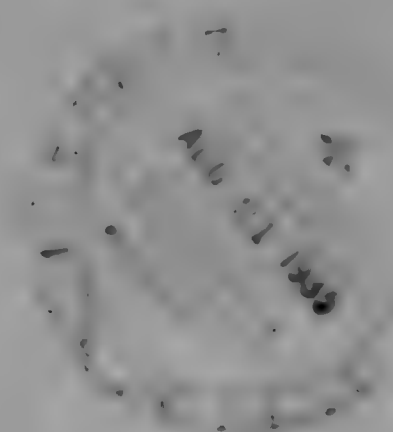




REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. Carrillo  
Port of Charleston, S. C. on August 15 1935.

arriving at the

| NAME<br>(in full)    | SEX | AGE | NATIVITY | CLASS<br>(First, second, third, steerage) | PASSENGER<br>MANIFEST<br>Sheet No. | DIAGNOSIS                              | PRESENT<br>Physical<br>Condition | REMARKS      | This column reserved for U. S. Medical Examiners' notations | In this column, Immigrant Inspectors will note U. S. Examiners' notations |
|----------------------|-----|-----|----------|-------------------------------------------|------------------------------------|----------------------------------------|----------------------------------|--------------|-------------------------------------------------------------|---------------------------------------------------------------------------|
| Mrs. Janet L. Weyand | F   |     | U. S.    | 1                                         |                                    | Effect of heat                         | Good                             | Recovered    |                                                             |                                                                           |
| Mrs. Isabel Hessler  | F   |     | U. S.    | 1                                         |                                    | Poisoning by food                      | "                                | Recovered    |                                                             |                                                                           |
| Erman Gershenfeld    | M   |     | U. S.    | 1                                         |                                    | abrasion of skin<br>wound of great toe | "                                | Convalescing |                                                             |                                                                           |



CREW

|                  |   |    |       |      |  |                     |          |           |  |  |
|------------------|---|----|-------|------|--|---------------------|----------|-----------|--|--|
| Magnum Soares    | M | 30 | Spain | Crew |  | Scalp wound         | Good     | Recovered |  |  |
| William Clark    | M | 45 | U. S. | "    |  | Burn of finger      | "        | "         |  |  |
| Charles Jennings | M | 45 | U. S. | "    |  | Contusion right hip | "        | "         |  |  |
| Erny Florito     | M | 35 | U. S. | "    |  | Contusion scalp     | "        | "         |  |  |
| Erich Weigel     | M | 36 | U. S. | "    |  | Herpes of penis     | "        | "         |  |  |
| Emil Majewski    | M | 22 | U. S. | "    |  | Poisoning by food   | temp 102 |           |  |  |

Note. All alien members of crew examined August 14, P.M., and found free of venereal and other diseases.

To the U. S. Commissioner of Immigration:

I hereby declare that to the best of my knowledge and belief the foregoing is a true and complete statement of the diseases, injuries, births, and deaths among the passengers during the voyage.

Carl Ramm

|             |             |                  |
|-------------|-------------|------------------|
| Cuban       | Rumanian    | Slovenian        |
| Dalmatian   | Lithuanian  | Spanish          |
| Dutch       | Magyar      | Spanish American |
| East Indian | Mexican     | Syrian           |
| English     | Montenegrin | Turkish          |
| Finnish     | Moravian    |                  |



## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1922.

## INSTRUCTIONS.

12110121

*Disasters, Injuries, Births, and Deaths during the voyage.*

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Form 502

S.S. Canillo  
 August 15  
 M. J. Canino

THE UNIVERSITY OF CHICAGO

T. J. L. M. VAN DER WERF

Dalmatian.  
Dutch.  
East Indian.  
English.  
Finnish.

1. Indien.  
 2. Magyar.  
 3. Mexico.  
 4. Montenegro.  
 5. Morocco.

Spanish.  
Spanish American.  
Syrian.  
Turkish.



## AFFIDAVIT OF SURGEON

I, Henry A. Cotton, Jr., M. D., Surgeon of the American ss. "BAPTIST", sailing therewith  
solemnly, sincerely, and truly SWEAR that I have had one years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of Board of Medical Examiners  
of Maryland, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this 21 day of Dec. 1873  
at New York

Henry H. Cattell, N.Y.

Wm. H. Hall  
New York, N.Y.

## LIST OF NAMES OF PEOPLE



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be listed on this (pink) sheet in the following manner:

3513

S. S.

"2077A" American

Passengers sailing from San Juan, Puerto Rico

450 137

1938

[illegible]



It is understood that they intend, however, to fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver this document to the local police office.

1941

19-

FORM NO. 1  
 6-10031  
 U. S. DEPARTMENT OF LABOR  
 IMMIGRATION SERVICE  
 Part of San Juan P.R.  
 1914  
 This is to certify that the alien, Thomas Jackson,  
 native of P.R., race, has been lawfully admitted to the United States (to and of  
 the English race, has been lawfully admitted to the United States (to and of  
 residence be shown by records of this alien as follows:  
 Admitted at San Juan P.R. 6/23, 1908 as a White  
 Status under Immigration Act of 1907 when admitted 1921 Black  
 Said alien is about to proceed to New York via the steamer  
West and is entitled to admission at a seaport of continental United  
 States upon identification and surrender of this certificate.  
 Personal description of alien: Age, 14; Height, 5; Color of hair, Brown  
 Color of eyes, Brown  
 Identifying documents in alien's possession  
 Signature of alien, Thomas Jackson  
 Inspector Thomas Jackson

4 alien passengers  
Carried O.K.  
Capt. Kambor  
H. P. Swenson  
U.S. B. H. S.



States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

FIRST-CABIN PASSENGERS ONLY

The entries on this sheet must be typewritten or printed.

[illegible]



AYT 3 3 A 8 02 T K O 9 U O

AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Robert W. Murray, Master, of the U.S.S. Albatross, from San Francisco, do  
solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
for going Lists or Manifest Sheets, four in number, and that from the report of said surgeon and from my own  
investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
section three of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in  
said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Robert W. Murray  
Master

San Francisco 21 at the port of  
at San Francisco

Robert W. Murray  
Master

INSTRUCTIONS FOR FILING ALIEN MANIFESTS

Separate sheets should be prepared for each part of alien passenger manifest.



doi:10.1017/S002229240000199

[illegible]

62







# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
THIRD-CLASS PASSENGERS ONLY

Arriving at Port of *PHILADELPHIA, Pa.*, *August 21*, 1935.

List *1*

The entries on this sheet must be typewritten or printed.

| 16          | 17                                                                                                                                                         | 18                | 19                                                | 20                          | 21                                                                     | 22                                                                   | 23                                                                                                               | 24                                 | 25                   | 26                   | 27                                            | 28                                           | 29                                           | 30                                | 31                                           | 32                                       | 33                   | 34     | 35         | 36            | 37            |                        |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------|-----------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|-----------------------------------------------|----------------------------------------------|----------------------------------------------|-----------------------------------|----------------------------------------------|------------------------------------------|----------------------|--------|------------|---------------|---------------|------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination | Whether having a ticket to such final destination | To whom with passport paid? | Whether in possession of visa, and if not, how much time to obtain one | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend, state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization | Whether a member of a communist organization | Whether a member of a socialist organization | Whether a member of a labor union | Whether a member of a fraternal organization | Condition of health, mental and physical | Deformed or crippled | Height | Complexion | Color of hair | Color of eyes | Mark of identification |
| 1           | JOHANNES BRAS, son.<br>Rotterdam, Holland                                                                                                                  | N.Y. N.Y.C.       | Yes                                               | Self                        | Yes                                                                    | No                                                                   | 2 days                                                                                                           | N.Y. N.Y.C.                        | No                   | No                   | No                                            | No                                           | No                                           | No                                | No                                           | Good                                     | No                   | 5'8"   | Med        | Gray          | Brown         | N-E                    |
| 2           | "                                                                                                                                                          | "                 | "                                                 | "                           | "                                                                      | No                                                                   | 2 days                                                                                                           | N.Y. N.Y.C.                        | No                   | No                   | No                                            | No                                           | No                                           | No                                | No                                           | Good                                     | No                   | 5'3"   | Med        | Gray          | Gray          | N-E                    |
| 3           |                                                                                                                                                            |                   |                                                   |                             |                                                                        |                                                                      |                                                                                                                  |                                    |                      |                      |                                               |                                              |                                              |                                   |                                              |                                          |                      |        |            |               |               |                        |

*2 John J. Cunningham  
Immigration Officer  
Philadelphia, Pa.  
August 21, 1935*



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Jacob Schroder, of the Duchas ROTTERDAM, from Rotterdam, Holland, do solemnly, sincerely, and truly <sup>swear</sup> that I have caused the surgeon of said vessel sailing therein, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Philadelphia, Pa 22<sup>nd</sup> day of August 1935

Samuel Horvath  
Immigration & Co.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

[illegible]

Figure 2. *Handing, lateral asymmetry, the adult brain, experience, and sex.* The same is the case of hemisphere specialization.

Comment 4 (Karl). The reviewer is also correct that I mentioned the presence of outliers, but without any further comment. I will fix this.

TABLE 2  
Regression coefficients for the three models

Figure 2. Effect of the concentration of the polymer on the swelling ratio of the hydrogel.

Source: U.S. Department of Commerce, Bureau of Economic Analysis, *Survey of Current Business*, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2

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<sup>1</sup> A. J. Auerbach, *Journal of Polymer Science: Part A: Polymer Chemistry*, **19**, 1111 (1981).

1. *Journal of the American Statistical Association*, 93(463), 1089-1092.

Source: *Journal of the American Statistical Association*, 90 (1995), 1033-1042.

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[illegible]

management practices, such as the use of herbicides, are needed to control the spread of *A. theophrasti* and the recovery of native plant communities.

the authors' interpretation of the experimental evidence and modeling of heat and mass transfer in the system. A model for the convective heat transfer effects in the liquid region is presented.

the fact that the model is not a perfect fit to the data. The model is a good approximation of the data, but it is not a perfect fit. The model is a good approximation of the data, but it is not a perfect fit.

\*The authors thank the members of the Department of Psychology at the University of Illinois at Chicago for their helpful comments on earlier drafts of this manuscript.

Read Section 1000-1001 of the *Model Penal Code* (see below) for more information.



Report on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a part of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a part of continental United States, or a part of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

U.S. (Insular) sailing from San Juan, Puerto Rico, August 17, 1922, Arriving at Port of Philadelphia, Pa., August 22, 1922

| Serial Number | Name in Full     |                   | Age | Sex | Color | If Native of United States Insular Possession or If Native of United States, Give Date and Place of Birth (City or Town and State) | If Naturalized, Give Name and Location of Court Which Issued Naturalization Papers, and Date of Papers | Address in United States                                             |
|---------------|------------------|-------------------|-----|-----|-------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
|               | Family Name      | Given Name        |     |     |       |                                                                                                                                    |                                                                                                        |                                                                      |
| 1             | Anderson         | Mary              | 40  | F.  | S.    | Cornwall, N. Y., October 5, 1885                                                                                                   |                                                                                                        | 7 Elm Ave., Cheltenham, Pa.                                          |
| 2             | Anthony          | Michael R.        | 32  | F.  | S.    | Bu Bois, Pa., November 30, 1902                                                                                                    |                                                                                                        | 14 E. Weber Ave., Bu Bois, Pa.                                       |
| 3             | Bachner          | Morgan            | 30  | M.  | M.    | Tuscaloosa, Ala., March 9, 1908                                                                                                    |                                                                                                        | 2122 E. Calvert St., Baltimore, Md.                                  |
| 4             | Bachner          | Louise W.         | 29  | F.  | M.    | Lansford, Pa., January 24, 1906                                                                                                    |                                                                                                        | do.                                                                  |
| 5             | Cajigas          | Yenne             | 41  | M.  | M.    | Rincon, P. R., March 7, 1894                                                                                                       |                                                                                                        | 1824 16th St., Washington, D.C.                                      |
| 6             | Cajigas          | Anna S.           | 37  | F.  | M.    | New York, N. Y., June 9, 1898                                                                                                      |                                                                                                        | do.                                                                  |
| 7             | Cajigas          | Anita             | 18  | F.  | S.    | Washington, D. C., February 24, 1922                                                                                               |                                                                                                        | do.                                                                  |
| 8             | Cajigas          | Thomas R.         | 11  | M.  | S.    | Washington, D. C., November 23, 1924                                                                                               |                                                                                                        | do.                                                                  |
| 9             | Cajigas          | Paul A.           | 9   | M.  | S.    | Washington, D. C., July 25, 1920                                                                                                   |                                                                                                        | do.                                                                  |
| 10            | Catinchi         | Antonio           | 40  | M.  | M.    | Ponce, P. R., June 18, 1895                                                                                                        |                                                                                                        | do. <i>Left Hotel</i><br>c/o Singer Sewing Mach. Co., New York, N.Y. |
| 11            | Catinchi, F. de  | Cecilia           | 40  | F.  | M.    | Mayaguez, P. R., March 20, 1895                                                                                                    |                                                                                                        | do.                                                                  |
| 12            | Catinchi         | Ridi              | 16  | F.  | S.    | San Juan, P. R., December 18, 1919                                                                                                 |                                                                                                        | do.                                                                  |
| 13            | Christian        | Clara P.          | 70  | F.  | M.    | Richmond, Va., September 2, 1865                                                                                                   |                                                                                                        | 1421 Whipple St., Rosslyn, Va.                                       |
| 14            | Coale            | Edith             | 27  | F.  | S.    | Massfield, O., January 23, 1898                                                                                                    |                                                                                                        | The Ray Adam House, Washington, D.C.                                 |
| 15            | Craigie          | Anne Myers        | 27  | F.  | M.    | Durham, N. C., November 11, 1907                                                                                                   |                                                                                                        | 2419 Hawthorne Ave., Richmond, Va.                                   |
| 16            | Craigie          | Anna Penier       | 1   | F.  | S.    | Richmond, Va., February 25, 1923                                                                                                   |                                                                                                        | do.                                                                  |
| 17            | Denton           | Charles Frederick | 49  | M.  | M.    | Palmer, England, December 7, 1886                                                                                                  | U.S. District Court, San Juan, P.R., August 1919                                                       | 147 Portland Ave., Mount Royal, P.Q., Canada                         |
| 18            | Denton           | Grace Elizabeth   | 48  | F.  | M.    | Kington, Ont., Canada, March 20, 1890                                                                                              | By marriage to American citizen, as above                                                              | do.                                                                  |
| 19            | Denton           | Ann Grace         | 19  | F.  | S.    | San Juan, P. R., August 14, 1914                                                                                                   |                                                                                                        | do.                                                                  |
| 20            | Fish             | Leora             | 26  | F.  | S.    | Amherst, Mass., August 11, 1908                                                                                                    |                                                                                                        | 43 Fearing St., Amherst, Mass.                                       |
| 21            | Fournier         | Marie             | 30  | F.  | M.    | San Juan, P. R., November 11, 1904                                                                                                 |                                                                                                        | 204 Piedmont St., Reidsville, N.C.                                   |
| 22            | Gane             | Marjorie          | 21  | F.  | S.    | New York, N. Y., April 13, 1914                                                                                                    |                                                                                                        | 87 Central Park W., New York, N.Y.                                   |
| 23            | Garcia de Cuervo | Yodaro            | 27  | M.  | M.    | Amazo, P. R., November 8, 1908                                                                                                     |                                                                                                        | Sparks, Md.                                                          |
| 24            | Gonzales Cordova | Margarita         | 20  | F.  | S.    | Bayamon, P. R., December 24, 1915                                                                                                  |                                                                                                        | 204 Piedmont St., Reidsville, N.C.                                   |
| 25            | Harrison         | George A.         | 35  | M.  | M.    | Pennock, N. H., September 19, 1869                                                                                                 |                                                                                                        | 2026 3rd St., Clarendon, Va.                                         |
| 26            | Harrison         | Mary T.           | 63  | F.  | M.    | Fort Wyer, N. H., November 23, 1878                                                                                                |                                                                                                        | do.                                                                  |
| 27            | Harrison         | Elizabeth         | 40  | F.  | S.    | Urbana, O., April 2, 1885                                                                                                          |                                                                                                        | do.                                                                  |
| 28            | Huffman          | Eden              | 30  | F.  | S.    | Ponce, P. R., February 26, 1908                                                                                                    |                                                                                                        | 100 W. 17th St., Lawrence, Kan.                                      |
| 29            | Hartness         | Francisco         | 34  | M.  | M.    | Arecibo, P. R., April 21, 1897                                                                                                     |                                                                                                        | c/o I.N. Hall & Co., 118 Broad St., New York                         |
| 30            | Hartness, W. H.  | Catalina          | 30  | F.  | M.    | Aguadilla, P. R., August 6, 1908                                                                                                   |                                                                                                        | do.                                                                  |



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. ALBATROSS American sailing from San Juan, Puerto Rico, August 17, 1935, Arriving at Port of Philadelphia, Pa., August 22, 1935

| No.<br>on<br>List | NAME IN FULL    |            | AGE | SEX | Married on<br>List | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES           |
|-------------------|-----------------|------------|-----|-----|--------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------|
|                   | Family Name     | Given Name |     |     |                    |                                                                                                                                          |                                                                                                              |                                    |
| 1                 | Anderson        | Vary       | 40  | F   |                    | San Juan, P. R., October 6, 1905                                                                                                         |                                                                                                              | 7 1/2 Ave., Charleston, Pa.        |
| 2                 | Arthing         | Joseph E.  | 39  | M   |                    | San Juan, P. R., December 30, 1902                                                                                                       |                                                                                                              | 14 S. 6th Ave., St. John, Pa.      |
| 3                 | Buchner         | Edward     | 36  | M   |                    | Bucarestina, Sib., March 9, 1905                                                                                                         |                                                                                                              | 232 S. Calvert St., Baltimore, Md. |
| 4                 | Buchner         | John E.    | 37  | M   |                    | San Juan, P. R., January 26, 1906                                                                                                        |                                                                                                              | do.                                |
| 5                 | Callahan        | Thomas     | 41  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | 1004 10th St., Washington, D. C.   |
| 6                 | Callahan        | John E.    | 37  | M   |                    | <i>Philadelphia, Pa., 1908</i>                                                                                                           |                                                                                                              | do.                                |
| 7                 | Callahan        | John       | 32  | M   |                    | Washington, D. C., February 24, 1902                                                                                                     |                                                                                                              | do.                                |
| 8                 | Callahan        | Thomas E.  | 32  | M   |                    | Washington, D. C., December 27, 1904                                                                                                     |                                                                                                              | do.                                |
| 9                 | Callahan        | Paul E.    | 31  | M   |                    | Washington, D. C., July 25, 1905                                                                                                         |                                                                                                              | do.                                |
| 10                | Callahan        | John       | 30  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | <i>do.</i>                         |
| 11                | Callahan, E. E. | Thomas     | 30  | M   |                    | Washington, D. C., March 27, 1906                                                                                                        |                                                                                                              | 200 10th St., New York, N. Y.      |
| 12                | Callahan        | John       | 29  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 13                | Callahan        | John E.    | 28  | M   |                    | <i>Philadelphia, Pa., 1908</i>                                                                                                           |                                                                                                              | 1004 10th St., Washington, D. C.   |
| 14                | Callahan        | John       | 27  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 15                | Callahan        | John       | 26  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 16                | Callahan        | John       | 25  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 17                | Callahan        | John       | 24  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 18                | Callahan        | John       | 23  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 19                | Callahan        | John       | 22  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 20                | Callahan        | John       | 21  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 21                | Callahan        | John       | 20  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 22                | Callahan        | John       | 19  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 23                | Callahan        | John       | 18  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 24                | Callahan        | John       | 17  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 25                | Callahan        | John       | 16  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 26                | Callahan        | John       | 15  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 27                | Callahan        | John       | 14  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 28                | Callahan        | John       | 13  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 29                | Callahan        | John       | 12  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 30                | Callahan        | John       | 11  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 31                | Callahan        | John       | 10  | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 32                | Callahan        | John       | 9   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 33                | Callahan        | John       | 8   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 34                | Callahan        | John       | 7   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 35                | Callahan        | John       | 6   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 36                | Callahan        | John       | 5   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 37                | Callahan        | John       | 4   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 38                | Callahan        | John       | 3   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 39                | Callahan        | John       | 2   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |
| 40                | Callahan        | John       | 1   | M   |                    | Stoney, N. Y., March 7, 1904                                                                                                             |                                                                                                              | do.                                |







Y T 3 3 A 8 02 T M O 9 U O

Form 400  
U. S. DEPARTMENT OF LABOR

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

LIST OF UNITED STATES CITIZENS  
(FOR THE IMMIGRATION AUTHORITIES)

S. S. "ALABAMA" (American) sailing from San Juan, Puerto Rico, August 17, 1935, Arriving at Port of Philadelphia, Pa., August 21, 1935

| No.<br>of<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH - CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ADDRESS IN UNITED STATES             |
|-------------------|--------------|------------|-----|-----|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------|
|                   | Family Name  | Given Name |     |     |                                                                                                                                   |                                                                                                      |                                      |
| 1                 | Valley       | John L.    | 34  | M.  | Washington, D. C., June 4, 1891                                                                                                   |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 2                 | Valley       | Harry L.   | 33  | F.  | Baltimore, Md., December 27, 1892                                                                                                 |                                                                                                      | Do.                                  |
| 3                 | Werner       | Nicole     | 17  | F.  | New York, N. Y., June 17, 1918                                                                                                    |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 4                 | West         | William    | 30  | M.  | St. Louis, Mo., January 19, 1894                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 5                 | Werner       | Robert     | 17  | M.  | New York, N. Y., January 19, 1918                                                                                                 |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 6                 | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 7                 | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 8                 | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 9                 | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 10                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 11                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 12                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 13                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 14                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 15                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 16                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 17                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 18                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 19                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 20                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 21                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 22                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 23                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 24                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 25                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 26                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 27                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 28                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 29                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |
| 30                | Williamson   | Robert     | 15  | M.  | St. Louis, Mo., January 19, 1918                                                                                                  |                                                                                                      | 212 S. St., N. E., Washington, D. C. |

W. H. [Signature]  
J. H. [Signature]







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. ATENAS

Sailing from Frontera, Mexico

1 AUGUST 15, 1935, Arriving at Port of PHILADELPHIA PA 21 AUGUST, 1935

| No.<br>on<br>List                                                       | NAME IN FULL  |             | AGE     | Sex | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | RESIDENCE IN UNITED STATES            |
|-------------------------------------------------------------------------|---------------|-------------|---------|-----|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------|
|                                                                         | FAMILY NAME   | GIVEN NAME  | Yrs Mos |     |                                                                                                                                       |                                                                                                             |                                       |
| PASSENGERS EMBAKED AT PHILADELPHIA FOR PHILADELPHIA 7 AUG 1935 (Cruise) |               |             |         |     |                                                                                                                                       |                                                                                                             |                                       |
| 1                                                                       | Aspell        | Carlston    | ✓ 34 ✓  | M M | Passaic, NJ                                                                                                                           | 2 Aug 1891 ✓                                                                                                | 106 Washington Ave, Clifton NJ ✓      |
| 2                                                                       | Banker        | Ruth        | ✓ 20 ✓  | F S | New Brunswick NJ                                                                                                                      | 28 Sept 1914                                                                                                | 130 Bodwiso St, New Brunswick NJ      |
| 3                                                                       | Beavan        | Florence    | ✓ 30 ✓  | F S | Philadelphia Pa                                                                                                                       | 10 Dec 1904                                                                                                 | Minorva Court, Upper Merby, Pa        |
| 4                                                                       | Berger        | Lillian     | ✓ 25 ✓  | F S | Philadelphia, Pa                                                                                                                      | 26 Jan 1910                                                                                                 | 6836 Spantz Ave, Phila, Pa            |
| 5                                                                       | Black         | Marian      | ✓ 23    | F S | Tupper Lake, NY ✓                                                                                                                     | 14 Oct 1911                                                                                                 | 386 Central Ave, Plainfield NJ        |
| 6                                                                       | Diamond       | Jean        | ✓ 26 ✓  | F S | New York City ✓                                                                                                                       | 4 Jan 1899                                                                                                  | 380 Empire Blvd, B'klyn NY            |
| 7                                                                       | Freudenberger | Charles     | ✓ 36    | M M | Wethersfield, Pa ✓                                                                                                                    | 7 Oct 1899                                                                                                  | 6102 North 7th St, Phila Pa           |
| 8                                                                       | Freudenberger | Nancy       | ✓ 4     | F S | Philadelphia Pa ✓                                                                                                                     | 13 Sept 1931                                                                                                | do                                    |
| 9                                                                       | Greene        | Mary        | ✓ 29 ✓  | F S | Wash Ridge, NJ ✓                                                                                                                      | 14 Apr 1896                                                                                                 | 61 Porter Place, Montclair, NJ        |
| 10                                                                      | Horn          | Mollie      | ✓ 36    | F S | New York City ✓                                                                                                                       | 2 Apr 1899                                                                                                  | 3104 Grand Concession, NYC            |
| 11                                                                      | Hull          | Arthur      | ✓ 50 ✓  | M S | B'klyn NY                                                                                                                             | 18 Feb 1885                                                                                                 | 141 Terzimer St, B'klyn NY            |
| 12                                                                      | Jacobus       | Laura       | ✓ 34    | F S | Allentown, PA ✓                                                                                                                       | 10 Aug 1891                                                                                                 | 23 Carroll Ave, Montclair, NJ         |
| 13                                                                      | Jais          | Anita       | ✓ 31 ✓  | F S | New York City                                                                                                                         | 14 Jan 1904                                                                                                 | 78 West 1st St, Freeport, LI          |
| 14                                                                      | Leah          | Sally       | ✓ 31    | F S | New York City                                                                                                                         | 14 Dec 1901                                                                                                 | 100 West 10th St, NYC                 |
| 15                                                                      | Lavinthal     | Albert      | ✓ 28 ✓  | M S | Franklin, NJ                                                                                                                          | 13 May 1912                                                                                                 | 431 Greenwood Ave, Freeport NJ        |
| 16                                                                      | Levine        | Dorothy     | ✓ 21 ✓  | F S | New York City                                                                                                                         | 28 Apr 1914                                                                                                 | 1478 E 14th St, B'klyn NY             |
| 17                                                                      | Llewellyn     | Frederick T | ✓ 66    | M M |                                                                                                                                       | 1900<br>New Orleans Dist Court, New Orleans                                                                 | Newark A Co, Newark NJ                |
| 18                                                                      | Llewellyn     | Frederick B | 37      | M M | New Orleans, La ✓                                                                                                                     | 16 Sept 1899                                                                                                | 143 North Constance Ave, Montclair NJ |
| 19                                                                      | Llewellyn     | Contra      | ✓ 30    | F M | Wyack, NY                                                                                                                             | 5 Sept 1904                                                                                                 | do                                    |
| 20                                                                      | Llewellyn     | Barbara     | ✓ 9     | F S | Jersey City, NJ ✓                                                                                                                     | 5 May 1927                                                                                                  | do                                    |
| 21                                                                      | Loeb          | Victor      | ✓ 52 ✓  | M M | Philadelphia Pa ✓                                                                                                                     | 16 Nov 1876                                                                                                 | 1602 North 10th St, Phila Pa          |
| 22                                                                      | Loeb          | Dorothy     | ✓ 28 ✓  | F S | Philadelphia Pa                                                                                                                       | 15 Feb 1907                                                                                                 | do                                    |
| 23                                                                      | Loeb          | Milton      | ✓ 57 ✓  | M S | Philadelphia Pa                                                                                                                       | 7 Mar 1878                                                                                                  | 281 South 18th St, Phila Pa           |
| 24                                                                      | MacDonnell    | Anna        | ✓ 34    | F M | Philadelphia Pa                                                                                                                       | 2 Jan 1901                                                                                                  | 4048 Chester Ave, Phila Pa            |
| 25                                                                      | Teal          | Albert      | ✓ 31    | M S |                                                                                                                                       | Philadelphia Dist Court, Sept 1899                                                                          | 7017 Watson St, Phila Pa              |
| 26                                                                      | Walcott       | Florence    | ✓ 48 ✓  | F M | Monticello NY                                                                                                                         | 30 Apr 1886                                                                                                 | 1188 Whitney Ave, New Haven CT        |
| 27                                                                      | Walker        | George      | ✓ 31    | M S | Philadelphia Pa ✓                                                                                                                     | 13 Oct 1893                                                                                                 | 1200 E 7th Ave, Phila Pa              |
| 28                                                                      | Wartner       | Sally       | ✓ 28    | F S | New York City ✓                                                                                                                       | 26 Dec 1906                                                                                                 | 1175 E 14th St, B'klyn NY             |

*Delayed should  
be returned*







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S.  
Port of PHILADELPHIA

ATHENS

arriving at the

on AUGUST 21 19 35

| Name | Sex | Nativity | Age | Rank | Initials | Remarks |
|------|-----|----------|-----|------|----------|---------|
|------|-----|----------|-----|------|----------|---------|

NONE

• • • • •

To the U.S. Commissioner of Immigration:  
I certify that the foregoing is a true and correct copy of the original report of the ship's doctor, or other person in charge of the ship, as furnished to the U.S. Commissioner of Immigration at the port of arrival.

Charles J. Quinn  
S.A. J. QUINN

RA Lueran  
S.A. LUEMAN

W. H. H. H.



## References

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Form 502

Atenas

Irregular

August 21. 1935

Adrian

1210121

injury, birth, and death during the voyage.

## REPORT OF SHIP'S SURGEON

U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

May 15, 1922

## INSTRUCTIONS.

1. The first part of the paper is devoted to the study of the properties of the function  $f(x)$  defined by the equation

[illegible]

© 2000 Blackwell Science Ltd  
Journal of Internal Medicine 247: 395–402

**Abstract**

## TRADUZIONE E ISTRUZIONI

*Journal of American Studies*, vol. 38, no. 1, pp. 1-10.

THESE FINDINGS ARE THE FIRST



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Am S. S. Cold Harbor sailing from Dundee, Scotland, August 7, 1935, Arriving at Port of Philadelphia, Pa. Aug. 22, 1935  
via  
Portland, Me. Aug. 18, 1935

| No.<br>on<br>List | NAME IN FULL |            | AGE |     | Sex | Married or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-------------------|--------------|------------|-----|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                   | FAMILY NAME  | Given Name | Yrs | Mon |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 1                 | Adams        | Joseph     | 0   | 7   | M   |                      | Montclair, N.J. Jan 7, 1911                                                                                                              |                                                                                                             | McC. Eastboro 270.<br>Portland, Me. 104 |
| 2                 |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 3                 |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 4                 |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 8                 |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 9                 |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 10                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 15                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 16                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 17                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 18                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 22                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 23                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
| 24                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 26                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 28                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |
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| 30                |              |            |     |     |     |                      |                                                                                                                                          |                                                                                                             |                                         |

16. 5. 1935 admitted  
Samuel Homewick  
N. B. 11

Examined by Inspector C. J. Adams at Portland, Me.  
Aug. 18, 1935







### AFFIDAVIT OF SURGEON

I, Ben Gile, Surgeon of the S.S. "Tivives", sailing therewith, do solemnly, sincerely, and truly declare that I have had Thirty Five years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Pennsylvania State Board of Medical Examiners, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of **AUGUST**, 19 **36**

128

1 Gen. & Lites 711 E.

## LIST OF PLACES OR PEOPLE

It should be noted that the observed increase in the number of cases among the long-term care group. The increase may be due to the fact that nursing homes are more likely to report cases of influenza than the community.

| Country | Year | Value |
|---------|------|-------|
| Algeria | 1980 | 1.00  |
| Algeria | 1981 | 1.00  |
| Algeria | 1982 | 1.00  |
| Algeria | 1983 | 1.00  |
| Algeria | 1984 | 1.00  |
| Algeria | 1985 | 1.00  |
| Algeria | 1986 | 1.00  |
| Algeria | 1987 | 1.00  |
| Algeria | 1988 | 1.00  |
| Algeria | 1989 | 1.00  |
| Algeria | 1990 | 1.00  |
| Algeria | 1991 | 1.00  |
| Algeria | 1992 | 1.00  |
| Algeria | 1993 | 1.00  |
| Algeria | 1994 | 1.00  |
| Algeria | 1995 | 1.00  |
| Algeria | 1996 | 1.00  |
| Algeria | 1997 | 1.00  |
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| Algeria | 1999 | 1.00  |
| Algeria | 2000 | 1.00  |
| Algeria | 2001 | 1.00  |
| Algeria | 2002 | 1.00  |
| Algeria | 2003 | 1.00  |
| Algeria | 2004 | 1.00  |
| Algeria | 2005 | 1.00  |
| Algeria | 2006 | 1.00  |
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| Algeria | 2009 | 1.00  |
| Algeria | 2010 | 1.00  |
| Algeria | 2011 | 1.00  |
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| Algeria | 2019 | 1.00  |
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| Algeria | 2021 | 1.00  |
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| Algeria | 2025 | 1.00  |
| Algeria | 2026 | 1.00  |
| Algeria | 2027 | 1.00  |
| Algeria | 2028 | 1.00  |
| Algeria | 2029 | 1.00  |
| Algeria | 2030 | 1.00  |
| Algeria | 2031 | 1.00  |
| Algeria | 2032 | 1.00  |
| Algeria | 2033 | 1.00  |
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| Algeria | 2088 | 1.00  |
| Algeria | 2089 | 1.00  |
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| Algeria | 2091 | 1.00  |
| Algeria | 2092 |       |



02 T M O 9 U O

Form 100  
U.S. DEPARTMENT OF LABOR  
IMMIGRATION AND NATURALIZATION SERVICE

List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

This (pink) sheet is for the listing of

3514

S. S. "TIVIVES"

Passengers sailing from PUERTO BARRIOS, GUATEMALA

, AUGUST 18th, 1935

| 1           | 2               | 3            | 4          | 5         | 6                 | 7                     | 8                      | 9           | 10             | 11             | 12                                                     | 13     | 14                                             | 15                                                  |
|-------------|-----------------|--------------|------------|-----------|-------------------|-----------------------|------------------------|-------------|----------------|----------------|--------------------------------------------------------|--------|------------------------------------------------|-----------------------------------------------------|
| No. on List | HEAD-TAX STATUS | NAME IN FULL | Age        | Sex       | Married or Single | Calling or occupation | Able to read and write | Nationality | Race or people | Place of birth | Immigration Visa, Permit Visa, or Return Ticket number | Issued | Data concerning verification of landings, etc. | Last permanent residence                            |
|             |                 | Family name  | Given name | Yrs. Mos. |                   |                       |                        |             |                | Country        | City or town, State, Province, or District             | Place  | Date                                           | Country, City or town, State, Province, or District |

GRUPE PASSENGER FROM PHILADELPHIA, PA. - AUGUST 12th 1935

|   |  |             |      |    |   |   |               |     |         |     |             |         |         |            |        |              |
|---|--|-------------|------|----|---|---|---------------|-----|---------|-----|-------------|---------|---------|------------|--------|--------------|
| 1 |  | HARTACLOUGH | JOHN | 27 | M | S | Store Manager | Yes | English | Yes | Dr. British | English | England | Workington | U.S.A. | PHILADELPHIA |
|---|--|-------------|------|----|---|---|---------------|-----|---------|-----|-------------|---------|---------|------------|--------|--------------|

Provided for by the Government  
at Philadelphia, Pa. 7-2-35

J. F. [Signature]



The entries on this sheet must be typewritten or printed.

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigrant inspector

FIRST-CABIN PASSENGERS ONLY

[illegible]

No 56 Fr Er

1718  
1-22-91

U.S.N.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Frank Angus <sup>(Please Print Name, Rank or Grade, and Office)</sup> Master, of the American S.S. "Tivives", from NEW YORK, do solemnly, sincerely, and truly that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, ONE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true to every respect.

Sworn to before me this \_\_\_\_\_ day of **AUGUST**, 19 **36**

a)

*Thymus praecox* L.

## INSTRUCTION, FOR PREPARING, ALLEN MANIFESTS

[illegible][illegible][illegible]



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

*Amie*  
S. S. "TIVIVIS"

sailing from PTO. BARRIOS, GUATEMALA

, AUG. 18th

, 19 35, Arriving at Port of

PHILADELPHIA, PA.

AUG. 25th, 19 35

| No.<br>on<br>List                                                   | NAME IN FULL |            | AGE | Sex | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES              |
|---------------------------------------------------------------------|--------------|------------|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------|
|                                                                     | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| CRUISE PASSENGERS EMPARKED AT PHILADELPHIA, PA. - AUGUST 12th 1935  |              |            |     |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 1                                                                   | CANDEE       | NEHEMIAH   | 65  | M   | M                    | Aug. 9th. 1870                                                                                                                           | Easton, Conn.                                                                                                | 10 Arch St., Norwalk, Conn.           |
| 2                                                                   | CANDEE       | ANNIE      | 64  | F   | M                    | Dec. 11th. 1870                                                                                                                          | Chaptico, Maryland                                                                                           | 10 Arch St., Norwalk, Conn.           |
| 3                                                                   | ELY          | ELEANOR    | 40  | F   | S                    | June 24th. 1895                                                                                                                          | Montgomeryville, Pa.                                                                                         | 2491 N. 50th., St., Philadelphia, Pa. |
| 4                                                                   | FEINSTEIN    | MYER       | 39  | M   | M                    | May 10th. 1896                                                                                                                           | Philadelphia, Pa.                                                                                            | 434 Glen Echo Rd., Philadelphia, Pa.  |
| 5                                                                   | FEINSTEIN    | ROSALINE   | 34  | F   | M                    | Aug. 17th. 1901                                                                                                                          | Altoona, Pa.                                                                                                 | 434 Glen Echo Rd., Philadelphia, Pa.  |
| 6                                                                   | JOHNSFELD    | LILLIAN    | 53  | F   | M                    |                                                                                                                                          | By Marriage 1906                                                                                             | Rittenhouse Plaza, Philadelphia, Pa.  |
| 7                                                                   | HOWLAND      | ARTHUR     | 27  | M   | S                    | Jan. 13th 1908                                                                                                                           | Philadelphia, Pa.                                                                                            | Guernsey Rd., Swarthmore, Pa.         |
| 8                                                                   | HOWLAND      | CHARLES    | 30  | M   | S                    | July 14th 1905                                                                                                                           | Ithaca, N.Y.                                                                                                 | Guernsey Rd., Swarthmore, Pa.         |
| 9                                                                   | HENDERICKSON | IRVIN      | 44  | M   | S                    | Oct. 2nd. 1890                                                                                                                           | Chesterfield, N.J.                                                                                           | 419 Elizabeth Manor, Upper Merby, Pa. |
| 10                                                                  | HOWARD       | LAURA      | 61  | F   | S                    | Dec. 22nd. 1873                                                                                                                          | Chester, Pa.                                                                                                 | Bryn Mawr College, Bryn Mawr, Pa.     |
| 11                                                                  | JORDAN       | JOHN       | 30  | M   | M                    | Sept. 18th 1904                                                                                                                          | Philadelphia, Pa.                                                                                            | 1800 Chelsea Rd., W. Oak Lane, Phila. |
| 12                                                                  | LEWIS        | WILLIAM    | 37  | M   | M                    | Jan. 12th 1898                                                                                                                           | Philadelphia, Pa.                                                                                            | 2316 Belmont Av., Ardmore, Pa.        |
| 13                                                                  | LEWIS        | ROTHIE     | 34  | F   | M                    | Mar. 4th 1901                                                                                                                            | Philadelphia, Pa.                                                                                            | 2316 Belmont Av., Ardmore, Pa.        |
| 14                                                                  | LEWIN        | JACK       | 47  | M   | M                    | Dec. 4th. 1888                                                                                                                           | Philadelphia, Pa.                                                                                            | 6306 N. 13th St., Philadelphia, Pa.   |
| 15                                                                  | LEWIN        | ELISE      | 37  | F   | M                    | Mar. 1st 1898                                                                                                                            | New Bedford, Mass.                                                                                           | 6302 N. 13th St., Philadelphia, Pa.   |
| 16                                                                  | LYNAM        | NICHOLAS   | 40  | M   | S                    | June 18th 1895                                                                                                                           | Philadelphia, Pa.                                                                                            | 3786 Hamilton St., Philadelphia, Pa.  |
| 17                                                                  | LAYHOLTER    | GAZENA     | 27  | F   | M                    | Jan. 7th 1909                                                                                                                            | Philadelphia, Pa.                                                                                            | 311 S. 28th St., Philadelphia, Pa.    |
| 18                                                                  | O'NEILL      | BARA       | 38  | F   | W                    | Oct. 29th 1896                                                                                                                           | Philadelphia, Pa.                                                                                            | 7840 N. 28th St., Philadelphia, Pa.   |
| 19                                                                  | PEREIRA      | RAYDON     | 39  | M   | S                    | Sept. 3rd. 1896                                                                                                                          | W. Philadelphia, Pa.                                                                                         | 919 N. 28th St., W. Philadelphia, Pa. |
| 20                                                                  | REHINDEN     | MARGARET   | 78  | F   | S                    | Dec. 28rd. 1853                                                                                                                          | Philadelphia, Pa.                                                                                            | 1841 W. Yonkers St., Phila., Pa.      |
| 21                                                                  | WHITNEY      | ANNA       | 56  | F   | W                    | Aug. 20th. 1878                                                                                                                          | Cherry Hill, N.J.                                                                                            | 210 Essex Av., Newark, Pa.            |
| 22                                                                  | YUNTER       | BETHA      | 28  | F   | S                    | May 28th 1907                                                                                                                            | Maplewood, N.J.                                                                                              | 113 Oakview Av., Maplewood, N.J.      |
| PASSENGERS EMPARKED AT PUERTO BARRIOS, GUATEMALA - AUGUST 18th 1935 |              |            |     |     |                      |                                                                                                                                          |                                                                                                              |                                       |
| 23                                                                  | LANT         | CHARLES    | 35  | M   | M                    | Sept. 18th 1898                                                                                                                          | Turnerville, N.J.                                                                                            | 19 Thompson Av., Lancaster, Pa.       |
| 24                                                                  | LANT         | EDITH      | 30  | F   | M                    | Mar. 11th 1885                                                                                                                           | Philadelphia, Pa.                                                                                            | 19 Thompson Av., Lancaster, Pa.       |
| 25                                                                  | LEVINE       | MARY ALICE | 47  | F   | S                    | July 16th 1888                                                                                                                           | Cochecton, Ohio                                                                                              | 356 E. 57th St., New York, N.Y.       |
| 26                                                                  | LANEY        | MARY       | 38  | F   | W                    | Mar. 27th 1897                                                                                                                           | Lewiston, Maine                                                                                              | 46 New St., Lewiston, Maine           |
| 27                                                                  | LEWISLON     | MARION     | 27  | F   | S                    | June 15th 1908                                                                                                                           | New York, N.Y.                                                                                               | 210 W. 147th St., New York, N.Y.      |
| 28                                                                  | MC CLINTOCK  | ROSSETTA   | 35  | F   | S                    | Aug. 9th 1900                                                                                                                            | Philadelphia, Pa.                                                                                            | 621 Woodcrest Lane, Ardmore, Pa.      |
| 29                                                                  | ROBINSON     | MATHLEEN   | 38  | F   | S                    | June 28th. 1902                                                                                                                          | Franklin, N.Y.                                                                                               | 160 Milbank Av., Rochester, Penn.     |
| 30                                                                  | REIDMAN      | ELEANOR    | 37  | F   | S                    | June 10th 1898                                                                                                                           | Philadelphia, Pa.                                                                                            | 2826 W. 13th St., Philadelphia, Pa.   |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number **2**

### LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. **"TIVIVE S"**

sailing from **PUERTO RARRIO, GUATEMALA**, AUG. 18th, 19 35, Arriving at Port of **PHILADELPHIA, PA.** AUG. 25th, 19 35

| No.<br>or<br>Last | NAME IN FULL |            | AGE       | Sex | Status | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES            |
|-------------------|--------------|------------|-----------|-----|--------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                   | Family Name  | Given Name | Yrs. Mos. |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 1                 | ROBITER      | ROTH       | 37        | F   | S      | Sept. 29th 1897 Brooklyn, N.Y.                                                                                                          |                                                                                                              | 45 Christopher St., New York, N. Y. |
| 2                 | SHERMAN      | ANNE       | 30        | F   | S      | Oct. 23rd 1904 New York, N.Y.                                                                                                           |                                                                                                              | 462 E. 138th St., N.Y.C., N. Y.     |
| 3                 | WILLIAMS     | ESTHER     | 38        | F   | S      | Mar. 21st 1897 Boston, Mass                                                                                                             |                                                                                                              | 24 Clement Av., W. Roxbury, Mass    |
| 4                 |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 5                 |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 6                 |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
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| 12                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 13                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 14                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 15                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 16                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 17                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 18                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 19                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 20                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 21                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 22                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 23                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 24                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 25                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 26                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 27                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 28                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 29                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 30                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 31                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 32                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 33                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 34                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 35                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 36                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 37                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 38                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 39                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 40                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 41                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 42                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 43                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 44                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 45                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 46                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 47                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 48                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 49                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |
| 50                |              |            |           |     |        |                                                                                                                                         |                                                                                                              |                                     |







# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_ years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_ and that I have made a personal examination of  
each of the aliens named herein and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

## LIST OF RACES OR PEOPLES

"Race or people" is to be determined by the race to which the alien belongs and by the language they speak. The original race or people shall be the basis of the classification, and the parties herein be held only so far as to determine the original race.

|                 |                 |                   |
|-----------------|-----------------|-------------------|
| African (black) | Irish           | Portuguese        |
| Armenian        | Italian         | Russian           |
| Austrian        | Japanese        | Swedish (Swedish) |
| Belgian         | Latin (Latin)   | Swiss (Swiss)     |
| Chinese         | Polish (Polish) | Swiss (Swiss)     |
| Croatian        | Portuguese      | Swiss (Swiss)     |
| Czech           | Russian         | Swiss (Swiss)     |
| Danish          | Spanish         | Swiss (Swiss)     |
| East Indian     | Swiss           | Swiss (Swiss)     |
| English         | Swiss           | Swiss (Swiss)     |



Y T 3 7 A 2 0 2 T M O 9 U O

Form 569  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

List 1

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

5516

S. S. "TUGELA"

Passengers sailing from

SANTOS, BRAZIL

August 6, 1935

Passengers sailing from

August 1, 1935

| 1           | 2               | 3            | 4          | 5         | 6                 | 7                     | 8                                                           | 9                                                | 10             | 11             | 12                                                        | 13          | 14                                              | 15                       |
|-------------|-----------------|--------------|------------|-----------|-------------------|-----------------------|-------------------------------------------------------------|--------------------------------------------------|----------------|----------------|-----------------------------------------------------------|-------------|-------------------------------------------------|--------------------------|
| No. on List | HEAD-TAX STATUS | NAME IN FULL | Age        | Sex       | Married or single | Calling or occupation | Able to                                                     | Nationality, Country of which citizen or subject | Race or people | Place of birth | Immigration Visa, Passport Visa, or Reentry Permit number | Issued      | Date concerning verifications of landings, etc. | Last permanent residence |
|             |                 | Family name  | Given name | Yrs. Mos. |                   |                       | Read what language or 2 exceptions claimed, or what printed |                                                  |                | Country        | City or town, State, Province or District                 | Place       | Date                                            | Country                  |
| 1           |                 | Fehr         | Federico   | 38        | M                 | Capin                 | English                                                     | yes                                              | Swiss          | Switzerland    | Basle                                                     | P/12 Jan 26 | 227/35                                          | Argentina B.A.           |
| 2           |                 | Fehr         | Eduardo    | 30        | F                 | M                     |                                                             | yes                                              | Argentine      | Buenos Aires   | Buenos Aires                                              | P/13 Jan 26 | 227/35                                          |                          |
| 3           |                 | Fehr         | Eugene     | 11        | F                 | S                     |                                                             | yes                                              | Argentine      |                |                                                           | P/14 Jan 26 | 227/35                                          |                          |
| 4           |                 | Fehr         | Federico   | 38        | M                 | Capin                 | English                                                     | yes                                              | Swiss          | Switzerland    | Basle                                                     | P/12 Jan 26 | 227/35                                          | Argentina B.A.           |
| 5           |                 | Fehr         | Eduardo    | 30        | F                 | M                     |                                                             | yes                                              | Argentine      | Buenos Aires   | Buenos Aires                                              | P/13 Jan 26 | 227/35                                          |                          |
| 6           |                 | Fehr         | Eugene     | 11        | F                 | S                     |                                                             | yes                                              | Argentine      |                |                                                           | P/14 Jan 26 | 227/35                                          |                          |

2 aliens admitted under  
Sec 8 (a) for 6 months.  
Samuel Admiration

Local Agent Buenos Aires 227/35  
Luis Aug. 8, 1935  
M. J. J.

J. J. McCarthy  
Lafayette Bldg. Phila. Pa.  
Local Agents



States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer

FIRST-CABIN PASSENGERS ONLY

Phila., Pa. , August 26 , 1935.

The entries on this sheet must be typewritten or printed.

| No. on List | 16 | 17                                                                                                                                                         | 18                                                                        | 19                                                                                                                                            | 20                                                                   | 21                                                                                                               | 22                                 | 23                   | 24                   | 25                                                                                                                                                                                    | 26                                                                | 27                                                                | 28                                                                | 29                                                                | 30                                                                | 31                                                                | 32                                                                | 33                                                                | 34                                                                | 35                                                                | 36                                                                | 37                                                                |
|-------------|----|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|
|             |    | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(Indicate future permanent residence)</small> | By whom was passage paid?                                                                                                                     | Whether over before in the United States, and if so, when and where? | Whether going to join a relative or friend, state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a person who believes in a conspiracy to overthrow the Government of the United States or of any State, Territory, or Possession of the United States, or to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice | Whether a person who believes in a conspiracy to obstruct justice |
|             |    |                                                                                                                                                            | to U. S. or territory or possession                                       | Whether alien paid for passage (Indicate paid by whom, and if by alien, state name and complete address, and if relative, exact relationship) | Yes or No                                                            | Yes or No                                                                                                        | Yes or No                          | Yes or No            | Yes or No            | Yes or No                                                                                                                                                                             | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         | Yes or No                                                         |
|             |    |                                                                                                                                                            | State                                                                     | City or town                                                                                                                                  | Where?                                                               | Date of last departure                                                                                           |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
|             |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 1           |    | Francisco Z. Roldan                                                                                                                                        |                                                                           |                                                                                                                                               | Amesbury, N. H.                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 2           |    | Buenos Aires                                                                                                                                               |                                                                           |                                                                                                                                               | Buenos Aires                                                         |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 3           |    | Buenos Aires                                                                                                                                               |                                                                           |                                                                                                                                               | Buenos Aires                                                         |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 4           |    | Francisco Z. Roldan                                                                                                                                        |                                                                           |                                                                                                                                               | Buenos Aires                                                         |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 5           |    | Buenos Aires                                                                                                                                               |                                                                           |                                                                                                                                               | Buenos Aires                                                         |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 6           |    | Buenos Aires                                                                                                                                               |                                                                           |                                                                                                                                               | Buenos Aires                                                         |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 7           |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 8           |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 9           |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 10          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 11          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 12          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 13          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 14          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 15          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 16          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 17          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 18          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 19          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 20          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 21          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 22          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 23          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 24          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 25          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 26          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 27          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 28          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 29          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 30          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |
| 31          |    |                                                                                                                                                            |                                                                           |                                                                                                                                               |                                                                      |                                                                                                                  |                                    |                      |                      |                                                                                                                                                                                       |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |                                                                   |



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Niels Olsen, Master, of the Nor. s/s Tugela, from Santos Brazil, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have caused the surgeon of said vessel sailing therewith, or the surgeon  
employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the  
foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, and that from the report of said surgeon and from my own  
investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by  
laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said  
Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Wells Elder.  
1875.

Signed & before me this  
 at Philadelphia, Pa. 26<sup>th</sup> day of August, 1835  
 Samuel A. Brown Jr.  
 Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

*Argemone monensis* should be considered the only pure or nearly pure genotype known for the Troad. Since, providing its original, considerable locality was not subsequently colonized by the transposition of the  $\beta$  allele, all following its original monodominance should always be found in the same area and the  $\beta$  allele should thus, where there have been no further changes, be identical to the  $\beta$  allele of *A. monensis* from the Troad. The absence of the seedlings of a species that appeared in the same locality from which they were put in the same study and of any spread of  $\beta$  alleles to other *Argemone* areas referred to should be noted on the grounds that the species is monodominant.

[illegible][illegible]



AFFIDAVIT OF SURGEON

I, **M. CARRIDO ROMALES**, Surgeon of the **AMER. SS. CASINO**, <sup>Rosario</sup> EMPLOYED BY OWNERS THEREOF do solemnly, sincerely, and truly **SWEAR** that I have had **EIGHT** years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of **MEDICAL BOARD OF EXAMINERS OF P. R.** and that I have made a personal examination of each of the aliens named herein and that the foregoing lists or Manifest Sheets, **ONE** in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars relative to the mental and physical condition of such aliens.

*Dr. M. Carrido Romales*

Sworn to before me this **TWENTYFIRST** day of **AUGUST**, 1935  
at **SAN JUAN, PUERTO RICO**

*[Signature]*  
*[Signature]*

LIST OF NAMES OF PEOPLES

This is to certify that the names of the persons named herein are the names of the persons who were examined by me on the date and at the place named above, and that the names are true and correct.

|     |     |     |
|-----|-----|-----|
| 1   | 2   | 3   |
| 4   | 5   | 6   |
| 7   | 8   | 9   |
| 10  | 11  | 12  |
| 13  | 14  | 15  |
| 16  | 17  | 18  |
| 19  | 20  | 21  |
| 22  | 23  | 24  |
| 25  | 26  | 27  |
| 28  | 29  | 30  |
| 31  | 32  | 33  |
| 34  | 35  | 36  |
| 37  | 38  | 39  |
| 40  | 41  | 42  |
| 43  | 44  | 45  |
| 46  | 47  | 48  |
| 49  | 50  | 51  |
| 52  | 53  | 54  |
| 55  | 56  | 57  |
| 58  | 59  | 60  |
| 61  | 62  | 63  |
| 64  | 65  | 66  |
| 67  | 68  | 69  |
| 70  | 71  | 72  |
| 73  | 74  | 75  |
| 76  | 77  | 78  |
| 79  | 80  | 81  |
| 82  | 83  | 84  |
| 85  | 86  | 87  |
| 88  | 89  | 90  |
| 91  | 92  | 93  |
| 94  | 95  | 96  |
| 97  | 98  | 99  |
| 100 | 101 | 102 |





List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.  
This pink sheet is for the listing of

2575

S. S.

ROSARIO # 36

Passengers sailing from

SAN JUAN, P.R., AUGUST 21st, 1935,

, 19

| 1           | 2                                                                            | 3                                                 | 4                    | 5   | 6                 | 7                     | 8                                                                                     | 9                                                | 10             | 11                                                                             | 12                                                                                                                                      | 13                              | 14                                               | 15                                                                                       |
|-------------|------------------------------------------------------------------------------|---------------------------------------------------|----------------------|-----|-------------------|-----------------------|---------------------------------------------------------------------------------------|--------------------------------------------------|----------------|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------|------------------------------------------------------------------------------------------|
| No. on list | HEAD-TAX STATUS<br><small>Tax status for the individual subject only</small> | NAME IN FULL<br><br>Family name<br><br>Given name | Age<br><br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to<br><br>Read<br><br>Read what language or if exemption claimed, on what ground | Nationality, Country of which citizen or subject | Race or people | Place of birth<br><br>Country<br><br>City or town, State, Province or District | Immigration Visa, Passport Visa, or Reentry Permit number<br><br>Permit number with 24V, 24V, 19, or 19 and, the ground on which issued | Issued<br><br>Place<br><br>Date | Data concerning verification of signatures, etc. | Last permanent residence<br><br>Country<br><br>City or town, State, Province or District |

2575  
GELBERT

RAMON

30

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M

M

ENGINEER

Y

SPA.

ENG.

Y

SPAIN

SPANISH

SPA IN

MALLOCA

60042

S. JUAN

8/19/35

P. RICO

ARCTIC

1 alien admitted  
2nd Ad. 2nd

No. 444 for 2nd

3rd Ad. 2nd

4th Ad. 2nd

5th Ad. 2nd



**Passenger Manifest**

**Passengers at a port of another liner's possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.**

**PASSENGER MANIFESTS ONLY**



19 33

A. H. BULL & CO.  
SOLE BRICKS AND STEAM-ENGINE AGENTS  
115 BROAD STREET  
New York

Vol. 3, No. 1, p. 34, 35.  
 Part of Philadelphia, Pa.  
 August 24th 1880.

91111 officer,  
U. S. Army Service,  
Fort of Philadelphia, Pa.

DATE: \_\_\_\_\_

Told in battery that when killed or the  
 1940-1941 from Jan 1941, 1941-1942, or August 1941  
 1941-1942, during, disease or injuries occurred  
 against the prisoners and crew, and that their condition  
 of health is good.

9-10-1954

—

*[Handwritten: 100]*

ALBION CERTIFICATE OF NATURALIZATION

U S DEPARTMENT OF JUSTICE

RECORDS AND COMMUNICATIONS SECTION

Part of *[Handwritten: 17-195]*

This is to certify that the alien *[Handwritten: John J. Smith]*, born *[Handwritten: Jan 12, 1895]* at *[Handwritten: New York City]*, has been lawfully admitted to the United States for permanent residence as shown by records of this office and was admitted at *[Handwritten: New York City]* on *[Handwritten: May 29, 1951]*.

Noted under Immigration Act of 1952 and admitted to land at about as noted to *[Handwritten: New York City]* via the airport.

Admitted to admission at a port of continental United States upon identification and surrender of this certificate.

Personal description of alien: Age, *[Handwritten: 56]*; Height, *[Handwritten: 5'6"]*; Color of hair, *[Handwritten: Brown]*; Color of eyes, *[Handwritten: Blue]*.

Identifying description to which a person is known as *[Handwritten: John J. Smith]*.

Signature of alien *[Handwritten: John J. Smith]*

Date *[Handwritten: May 29, 1951]*

In witness whereof *[Handwritten: Robert L. Reed]*

*[Handwritten: 100]*



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of

PHILADELPHIA, PA.

August 26th

1935

List 270

The entries on this sheet must be typewritten or printed.

| 16          | 17                                                                                                                                                         | 18                                                                                                                                     | 19                                                                                                                                                                              | 20                                                    | 21                                                                                                                                                                              | 22                                                                                                                | 23                                                                                                                                                                                           | 24                   | 25                   | 26                                            | 27                                  | 28                                   | 29                                    | 30                                   | 31                                | 32                                      | 33                                             | 34                                | 35                                           | 36                                           | 37                                           |       |      |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|-----------------------------------------------|-------------------------------------|--------------------------------------|---------------------------------------|--------------------------------------|-----------------------------------|-----------------------------------------|------------------------------------------------|-----------------------------------|----------------------------------------------|----------------------------------------------|----------------------------------------------|-------|------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(This includes permanent residence)</small><br>Foreign country via port of departure<br>State City or town | By whom was passage paid?<br><small>Whether alien paid for passage, whether paid in advance, whether paid by a relative, friend, or other person, or by the government.</small> | Whether in possession of \$50. and if less, how much? | Whether ever before in the United States, and if so, when and where?<br><small>(Last admission date)</small><br>Yes No<br>Year or period of years Where? Date of last departure | Whether going to join a relative or friend; state name and complete address, and if relative, exact relationship. | Purpose of coming to United States<br><small>(This includes purpose of visit, whether for employment, education, etc.)</small><br>To visit To work To study To marry To join family To other | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization | Whether a member of a criminal gang | Whether a member of a secret society | Whether a member of a political party | Whether a member of a religious sect | Whether a member of a labor union | Whether a member of a trade association | Whether a member of a professional association | Whether a member of a social club | Whether a member of a fraternal organization | Whether a member of a religious organization | Whether a member of a political organization |       |      |
|             |                                                                                                                                                            |                                                                                                                                        |                                                                                                                                                                                 |                                                       |                                                                                                                                                                                 |                                                                                                                   |                                                                                                                                                                                              |                      |                      |                                               |                                     |                                      |                                       |                                      |                                   |                                         |                                                | Height<br>Feet Inches             | Complexion                                   | Color of Hair Eyes                           | Marks of identification                      |       |      |
| 1           | WIFE. CARMEN D. GIABERT<br>ARACIBO, P.R.                                                                                                                   | ARACIBO, P.R.                                                                                                                          | SELF                                                                                                                                                                            | Y                                                     | Y                                                                                                                                                                               | 20yrs. P.R.                                                                                                       | 1935 HOTEL TAFT, NEW YORK                                                                                                                                                                    | NO                   | IND                  | NO                                            | NO                                  | NO                                   | NO                                    | NO                                   | NO                                | NO                                      | NO                                             | 5                                 | 6                                            | FAIR                                         | BR                                           | Hazel | NONE |

Examined and found correct  
J. J. Sullivan  
Aug 28 1935



States, or a part of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

**FIRST-CABIN PASSENGERS ONLY**

The entries on this sheet must be typewritten or printed.

, 19 35

c/o FARR SUGAR CO. AND

1. Expenditure - one  
 = one expenditure  
 2. Expenditure - one  
 = one expenditure



C. Y. Miley  
Master  
Ogden

James P. H. Co.  
Immigration Office.

[illegible]











Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

3

# LIST OF UNITED STATES CITIZENS

Voyage 12

(FOR THE IMMIGRATION AUTHORITIES)

ALVAREZ OREGON, MEX AUGUST 20

ARRIVING AT PORT OF PHILADELPHIA, PA. 26; 1935.

U.S.S.

"GRANADA"

Sailing from

| No.<br>on<br>List | NAME IN FULL     |             | AGE  | SEX  | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF ENTRY |
|-------------------|------------------|-------------|------|------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
|                   | FAMILY NAME      | GIVEN NAME  | Yrs. | Mon. |                      |                                                                                                                                         |                                                                                                            |
| 1                 | Mintrip          | B. Mintrip  | 35   |      | F                    | July 11, 1902, Wilmington, Del.                                                                                                         | 715 Covecroft St., Wilmington, Del.                                                                        |
| 2                 | Leater           | George F.   | 31   |      | M                    | Jan. 1, 1904, Waco, N. C.                                                                                                               | 708 Commercial St., Waco, N. C.                                                                            |
| 3                 | Brink            | Raymond A.  | 30   |      | M                    | Nov. 23, 1905, Waco, N. C.                                                                                                              | 104 N. Main St., " "                                                                                       |
| 4                 | Howard Joseph L. | Joseph L.   | 30   |      | M                    | Jan. 6, 1905, Brooklyn, N. Y.                                                                                                           | 67 West 10th St., Brooklyn, N. Y.                                                                          |
| 5                 | Howard           | William J.  | 29   |      | M                    | Jan. 10, 1906, Waco, N. C.                                                                                                              | " "                                                                                                        |
| 6                 | Miller           | Marshall E. | 41   |      | M                    | Apr. 6, 1904, Philadelphia, Pa.                                                                                                         | 141 Chestnut St., Philadelphia, Pa.                                                                        |
| 7                 | Miller           | John L.     | 30   |      | F                    | May 1, 1905, " "                                                                                                                        | " "                                                                                                        |
| 8                 | Leater           | W. Leater   | 31   |      | M                    | Mar. 11, 1904, " "                                                                                                                      | 408 Thacker St., " "                                                                                       |
| 9                 | Howard           | William E.  | 31   |      | F                    | Jan. 10, 1906, Waco, N. C.                                                                                                              | " "                                                                                                        |
| 10                | Howard           | William E.  | 17   |      | F                    | Mar. 14, 1915, Waco, N. C.                                                                                                              | 204 Commercial St., Waco, N. C.                                                                            |
| 11                | White            | William J.  | 30   |      | M                    | Jan. 7, 1905, Waco, N. C.                                                                                                               | 41 N. Main St., Waco, N. C.                                                                                |
| 12                | Townsend         | William E.  | 30   |      | M                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 13                | Hoff             | Edward J.   | 30   |      | M                    | Mar. 20, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 14                | Hudale           | Charles     | 30   |      | M                    | Jan. 1, 1905, Waco, N. C.                                                                                                               | 21 N. Main St., Waco, N. C.                                                                                |
| 15                | James            | William J.  | 30   |      | F                    | Jan. 10, 1906, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 16                | Howard           | William E.  | 31   |      | M                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 17                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 18                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 19                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 20                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 21                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 22                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 23                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 24                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 25                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 26                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 27                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 28                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 29                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |
| 30                | Howard           | William E.  | 31   |      | F                    | Mar. 10, 1905, Waco, N. C.                                                                                                              | 202 N. Main St., Waco, N. C.                                                                               |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 4

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Voyage 13

S. S. "GRANADA" Sailing from ALVARO OREGON, MEX, PHILADELPHIA, JULY 20, 1935, Arriving at Port of PHILADELPHIA, AUGUST 20, 1935

| No. on List | NAME IN FULL |            | AGE       | Sex | Married or Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS. | ADDRESS IN UNITED STATES           |
|-------------|--------------|------------|-----------|-----|-------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------|
|             | FAMILY NAME  | GIVEN NAME | Yrs. Mos. |     |                   |                                                                                                                                     |                                                                                                         |                                    |
| 1           | Sisti        | C. Frank   | ✓ 26      | ✓ M | ✓                 | Nov. 6 1886 Trenton, N. J.                                                                                                          | ✓                                                                                                       | 636 So. Clinton St. Trenton N.J.   |
| 2           | Russo        | Richard    | ✓ 21      | ✓ M | ✓                 | Aug. 26 1913 Phila. Pa.                                                                                                             | ✓                                                                                                       | 13-1 Catherine St. Phila. Pa.      |
| 3           | Friedlander  | William L. | ✓ 12      | ✓ M | ✓                 | Sept 7 1903 New York N. Y.                                                                                                          |                                                                                                         | 204 West King St. Lancaster Pa.    |
| 4           | Jacobs       | Bessie M.  | ✓ 49      | ✓ F | ✓                 | Jan 7 1886 Lancaster Pa.                                                                                                            |                                                                                                         | "                                  |
| 5           | Esterson     | Bessie     | ✓ 27      | ✓ F | ✓                 | Dec 15 1886 Baltimore Md.                                                                                                           |                                                                                                         | 207 Spadessa Ave. Baltimore Md.    |
| 6           | Young        | Louise     | ✓ 20      | ✓ F | ✓                 | Feb 14 1908 "                                                                                                                       |                                                                                                         | 2066 Bessie St. "                  |
| 7           | Schindler    | Wm         | ✓ 31      | ✓ M | ✓                 |                                                                                                                                     | Supreme Court Baltimore Md., 1931 (Appendix)                                                            | 22 North Street "                  |
| 8           | Truett       | Laurette   | ✓ 41      | ✓ F | ✓                 | June 21 1891 Jersey City N.J.                                                                                                       |                                                                                                         | 87 Normandie Ave. Jersey City N.J. |
| 9           | Blain        | Leone      | ✓ 21      | ✓ M | ✓                 | Jan 27 1914 "                                                                                                                       |                                                                                                         | 601 Philadelphia Ave. "            |
| 10          | Blain        | Robert L.  | ✓ 20      | ✓ M | ✓                 | July 21 1914 "                                                                                                                      |                                                                                                         | "                                  |
| 11          | Bradenridge  | Wesley     | ✓ 21      | ✓ M | ✓                 | Jan 1 1914 Kansas City, Mo.                                                                                                         |                                                                                                         | 14 W. 14th. Marylandville, Va.     |

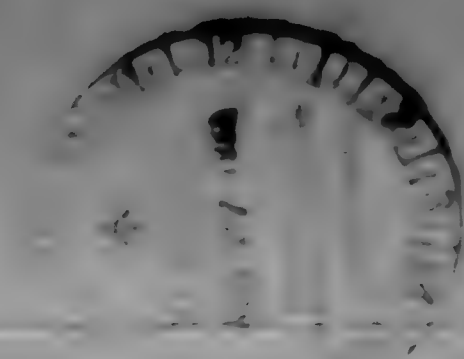
Witnessed by Special Agent

Aug 20, 1935.

41 of 46 Citizens submitted  
Immigration Authority  
S. S. "GRANADA"

Let us 3 full  
Wanted







AFFIDAVIT OF SURGEON

I, **VINCENT STRACK**, Surgeon of the SS "GRANADA", SAILING THEREWITH, do solemnly, sincerely, and truly **DECLARE** that I have had **ONE** years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, **ONE** in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

*Vincent J. Strack, M.D.*

Sworn to before me this **26** day of **AUGUST**, 19 **35**  
at **PHILADELPHIA, PA**

*Samuel S. Horowitz*  
U. S. IMMIGRANT INSPECTOR

LIST OF RACES OR PEOPLES

|     |     |     |
|-----|-----|-----|
| 1   | 2   | 3   |
| 4   | 5   | 6   |
| 7   | 8   | 9   |
| 10  | 11  | 12  |
| 13  | 14  | 15  |
| 16  | 17  | 18  |
| 19  | 20  | 21  |
| 22  | 23  | 24  |
| 25  | 26  | 27  |
| 28  | 29  | 30  |
| 31  | 32  | 33  |
| 34  | 35  | 36  |
| 37  | 38  | 39  |
| 40  | 41  | 42  |
| 43  | 44  | 45  |
| 46  | 47  | 48  |
| 49  | 50  | 51  |
| 52  | 53  | 54  |
| 55  | 56  | 57  |
| 58  | 59  | 60  |
| 61  | 62  | 63  |
| 64  | 65  | 66  |
| 67  | 68  | 69  |
| 70  | 71  | 72  |
| 73  | 74  | 75  |
| 76  | 77  | 78  |
| 79  | 80  | 81  |
| 82  | 83  | 84  |
| 85  | 86  | 87  |
| 88  | 89  | 90  |
| 91  | 92  | 93  |
| 94  | 95  | 96  |
| 97  | 98  | 99  |
| 100 | 101 | 102 |



List 2

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3517

Head S. S. GRANADA

Passengers sailing from ALVARO Obregon, Mexico PHILADELPHIA, PA, AUGUST 20, 1935

| 1           | 2                                                                                  | 3            | 4          | 5    | 6   | 7                 | 8                     | 9       | 10                                                     | 11                                                                  | 12             | 13             | 14      | 15                                                                                                                                                |                                           |       |                                                                                                                          |                          |         |
|-------------|------------------------------------------------------------------------------------|--------------|------------|------|-----|-------------------|-----------------------|---------|--------------------------------------------------------|---------------------------------------------------------------------|----------------|----------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------|--------------------------|---------|
| No. on list | HEAD-TAX STATUS<br><small>Two columns for use of Government officials only</small> | NAME IN FULL |            | Age  | Sex | Married or single | Calling or occupation | Able to |                                                        | Nationality<br><small>(Country of which citizen or subject)</small> | Race or people | Place of birth |         | Immigration Visa, Passport Visa, or Reentry Permit number<br><br><small>Do not number with QV, NQV, PV or EV and give serial if so marked</small> | Issued                                    |       | Data concerning verifications of landings, etc.<br><br><small>True or false for use of Government officials only</small> | Last permanent residence |         |
|             |                                                                                    | Family name  | Given name | Yrs. |     |                   |                       | Mos.    | Read what language or if cannot read, in what language |                                                                     |                | Write          | Country |                                                                                                                                                   | City or town, State, Province or District | Place |                                                                                                                          | Date                     | Country |
| 1           | 7-1-1<br>1-1-1                                                                     | BESTER       | WILLEM A C | 35   | S.  | M.                | DENTIST               | YES     | ENGLISH                                                | WYSE                                                                | SCARIN         | BRITISH        | SCARIN  | YATALA                                                                                                                                            | Round Trip passengered on<br>Sable vessel |       |                                                                                                                          | C. SA. PHILA. PA.        |         |
| 2           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 3           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 4           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 5           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 6           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 7           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 8           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 9           |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 10          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 11          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 12          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 13          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 14          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 15          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 16          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 17          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 18          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 19          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 20          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 21          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 22          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 23          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 24          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 25          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 26          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 27          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |
| 28          |                                                                                    |              |            |      |     |                   |                       |         |                                                        |                                                                     |                |                |         |                                                                                                                                                   |                                           |       |                                                                                                                          |                          |         |

One (Valen) small-Trip  
passenger admitted  
James H. H. H.  
to his room

Round Trip passenger on  
Sable vessel

USA PHILA PA

One (Walter) Smith-Trip  
passenger admitted  
Immigration Service  
to the vessel







## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, CHARLES S. HILL, MASTER of the U.S. "GRANADA", from San Francisco, California, do solemnly, sincerely, and truly DECLARE that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, ONE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Lehas 3 mlt  
W. Sten (Officer.)

Sworn to before me this 26<sup>th</sup> day of AUGUST, 1945  
at PHILADELPHIA, PA

Samuel A. Yarrant  
Immigration Officer

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Supervisors must first identify the personnel for each part of which assignments will be made for the United States, according to specific assignment groups, or job responsibilities, as defined by the Immigration Act of 1952 and also according to a wage schedule that shows those persons serving in the United States and the specified foreign field, whose positions are covered by Departmental orders. The Department will then determine the assignment of each individual. The number of assignments of a foreign staff supervisor upon the same individual, how long they will be in the same field, and if they travel in different classes, depending upon their position, must be made up the director will, the personnel manager will find.

[illegible][illegible]



# AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
 solemnly, sincerely, and truly that I have had \_\_\_\_\_ years' experience as a Physician  
 and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
 and that I have made a personal examination of \_\_\_\_\_  
 each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
 to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
 condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at \_\_\_\_\_

## LIST OF RACES OR TRIBES

| No. | Race or Tribe | No. | Race or Tribe | No. | Race or Tribe |
|-----|---------------|-----|---------------|-----|---------------|
| 1   | _____         | 1   | _____         | 1   | _____         |
| 2   | _____         | 2   | _____         | 2   | _____         |
| 3   | _____         | 3   | _____         | 3   | _____         |
| 4   | _____         | 4   | _____         | 4   | _____         |
| 5   | _____         | 5   | _____         | 5   | _____         |
| 6   | _____         | 6   | _____         | 6   | _____         |
| 7   | _____         | 7   | _____         | 7   | _____         |
| 8   | _____         | 8   | _____         | 8   | _____         |
| 9   | _____         | 9   | _____         | 9   | _____         |
| 10  | _____         | 10  | _____         | 10  | _____         |
| 11  | _____         | 11  | _____         | 11  | _____         |
| 12  | _____         | 12  | _____         | 12  | _____         |
| 13  | _____         | 13  | _____         | 13  | _____         |
| 14  | _____         | 14  | _____         | 14  | _____         |
| 15  | _____         | 15  | _____         | 15  | _____         |
| 16  | _____         | 16  | _____         | 16  | _____         |
| 17  | _____         | 17  | _____         | 17  | _____         |
| 18  | _____         | 18  | _____         | 18  | _____         |
| 19  | _____         | 19  | _____         | 19  | _____         |
| 20  | _____         | 20  | _____         | 20  | _____         |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3518

Hond S. S.

Passengers sailing from

, 19

| 1           | 2               | 3            | 4          | 5    | 6    | 7   | 8                 | 9                     | 10      | 11    | 12                                                | 13             | 14             | 15           |                         |           |      |                          |
|-------------|-----------------|--------------|------------|------|------|-----|-------------------|-----------------------|---------|-------|---------------------------------------------------|----------------|----------------|--------------|-------------------------|-----------|------|--------------------------|
| No. on List | HEAD-TAX STATUS | NAME IN FULL |            | Age  |      | Sex | Married or single | Calling or occupation | Able to |       | Nationality (Country of which citizen or subject) | Race or people | Place of birth |              | Immigration Visa Number | Issued at | Date | Last permanent residence |
|             |                 | Family name  | Given name | Yrs. | Mos. |     |                   |                       | Read    | Write |                                                   |                | Country        | City or town |                         |           |      |                          |
| 1           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 2           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 3           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 4           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 5           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 6           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 7           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 8           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 9           |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 10          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 11          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 12          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 13          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 14          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 15          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 16          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 17          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 18          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 19          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 20          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 21          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 22          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 23          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 24          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 25          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 26          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 27          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 28          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 29          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 30          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 31          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 32          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 33          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 34          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 35          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 36          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 37          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 38          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 39          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 40          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 41          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 42          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 43          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 44          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 45          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 46          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 47          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 48          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 49          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |
| 50          |                 |              |            |      |      |     |                   |                       |         |       |                                                   |                |                |              |                         |           |      |                          |

Standard Fruit & Ice Co.  
Pier 5, South Side  
New York

One (1) alien passenger  
admitted  
Samuel H. H. H.  
U. S. DEPARTMENT OF LABOR

GUATEMALA

Accountant  
#1270729 Washington, D.C. July 13, 1932

See Serial 1270729  
U. S. DEPARTMENT OF LABOR



STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer

FIRST-CABIN PASSENGERS ONLY

## Arriving at Port of

26

19

List

The entries on this sheet must be typewritten or printed.

[illegible]



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, *Chas. S. Hill*, Master, of the *U.S. Inanada*, from *A. Oregon Tab. Hespero*, solemnly, sincerely, and truly declare that I have caused the surgeon of said vessel, acting therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by section 10 of the Immigration Act, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifest Sheets concerning each of said aliens named therein is correct in every respect.

*Chas. S. Hill*  
Master

Subscribed and sworn to before me this *20* day of *Aug*, 1935, at *Philadelphia*.  
*Samuel H. Horowitz*  
Immigration Officer

INSTRUCTIONS FOR FILING ALIEN MANIFESTS

Separate sheets should be prepared for each port at which passengers embark.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number

*S.S. Sullivan* sailing from *San Francisco*, *Aug 15*, 19*35* Arriving at Port of *Philadelphia*, *8/26*, 19*35*

En  
Low

NAME IN FULL

AGE

SEX

MARRIAGE  
STATUS

IF NATIVE OF UNITED STATES INSULAR POSSESSION OR  
IF NATIVE OF UNITED STATES, GIVE DATE AND  
PLACE OF BIRTH (CITY OR TOWN AND STATE)

IF NATURALIZED, GIVE NAME AND LOCATION OF COURT  
WHICH ISSUED NATURALIZATION PAPERS,  
AND DATE OF PAPERS

ADDRESS IN UNITED STATES

FAMILY NAME

GIVEN NAME

YRS. MARR.

*June 16, 1907*

*124 E. Kennedy St.  
Pittsburgh, Pa.*

1 *Michael Joseph* *25* *M* *Pittsburgh, Pa.*

2 *Transferred from 1000 list*

3 *Noted and list as given by name of Michael Joseph*

4 *Married, did not work, admitted while in hospital*

5 *Deceased, 1st name*

6 *Deceased, 2nd name*

*John F. Sullivan*  
*Inspector*







Y T 3 7 A 8 02 T H O 9 U O

Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITIES

Ames  
S. S.

Gulfbird

sailing from

Las Piedras, Venezuela

, Aug. 24th 1935/9

, Arriving at Port of Philadelphia Pa. Aug. 31st 1935, 19

| No. | Name   | Age           | Sex | Maiden Name | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES GIVE DATE AND PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | Address in United States    |
|-----|--------|---------------|-----|-------------|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-----------------------------|
|     |        |               |     |             |                                                                                                                                 |                                                                                                      |                             |
| 1   | Majors | William S.F.  | 36  | ✓           | M. M. 6/12/44 Cottonwood Texas                                                                                                  |                                                                                                      | Goose Creek, Texas          |
| 2   | Majors | Frances A.J.  | 24  | ✓           | F. M. 10/13/31 Cottonwood, Texas                                                                                                |                                                                                                      | Edinburg Texas P.O. Box 122 |
| 3   | Majors | David Preston | 14  |             | M. S. 3/29/21 Boodyville Texas                                                                                                  |                                                                                                      | " " " "                     |
| 4   | Majors | Frances P.    | 11  |             | P. S. 2/6/24 Goose Creek Texas                                                                                                  |                                                                                                      | " " " "                     |
| 5   | Adams  | Harold        | 14  |             | M. S. 6/22/21 Tampico Mexico                                                                                                    |                                                                                                      | Martha Parness Pa.          |

Passport #566139 - Washington 11/25/32

6/12/44 Cottonwood Texas

10/13/31 Cottonwood, Texas

3/29/21 Boodyville Texas

2/6/24 Goose Creek Texas

6/22/21 Tampico Mexico

Lee B. Dolch

U. S. IMMIGRANT INSPECTOR

Goose Creek, Texas

Edinburg Texas P.O. Box 122

" " " "

" " " "

" " " "

Martha Parness Pa.







## AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do hereby certify that I have had \_\_\_\_\_ years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_, to the best of my knowledge and belief, are full, correct, and true in all particulars relating to the mental and physical condition of such aliens.

So, even though we're still *not* there, we're *closer* to it.

## LIST OF PAGES OR PEOPLE



List 1 1

## LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

3519

S. S. <sup>Nov-</sup>  
m/

"TINY TIGER"

### Passengers sailing from

August 15, 19.

| 1                 | 2                                                                                          | 3            | 4          | 5    | 6   | 7   | 8                           | 9       | 10                                                            | 11    | 12             | 13                                              | 14                                                                                                                                                                           | 15     |      |                                                                                                                              |                          |                                                 |
|-------------------|--------------------------------------------------------------------------------------------|--------------|------------|------|-----|-----|-----------------------------|---------|---------------------------------------------------------------|-------|----------------|-------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------|
| No.<br>on<br>List | HEAD-TAX<br>STATUS<br><br><small>This column for use of Government officials only.</small> | NAME IN FULL |            | Age  |     | Sex | Calling<br>or<br>occupation | Able to |                                                               |       | Place of birth |                                                 | Immigration Visa,<br>Passport Visa, or<br>Foreign Permit<br>number<br><br><small>Prefix number with<br/>OU, NGU, FI, or<br/>IP and give section<br/>if not provided.</small> | Issued |      | Data concerning<br>verification of<br>landings, etc.<br><br><small>This column for use of Government officials only.</small> | Last permanent residence |                                                 |
|                   |                                                                                            | Family name  | Given name | Yrs. | Mo. |     |                             | Read    | Speak what language or<br>of languages (name, or other given) | Write | Country        | City or town,<br>State, Province<br>or District |                                                                                                                                                                              | Place  | Date |                                                                                                                              | Country                  | City or town,<br>State, Province<br>or District |
|                   |                                                                                            |              |            |      |     |     |                             |         |                                                               |       |                |                                                 |                                                                                                                                                                              |        |      |                                                                                                                              |                          |                                                 |

1000

1 619123

2 1994

3 2725

119126

5



7

1

1

7

Lee B. Dolci  
DEPUTY INSPECTOR

*[Faint handwritten notes, possibly "The end of the world"]*

Local Agents:  
H. C. Little, agent

26 - 1944

Phyllis



Liv 1

States, or a part of another insular possession, in whatsoever class they travel, **MUST** be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

**FIRST-CABIN PASSENGERS ONLY**

August 31, 1931

| No.         | 16                                                                                                                                                         | 17    | 18                                                            | 19                                                | 20                                                   | 21                                                                   | 22                                                                                                               | 23                                                              | 24                                                              | 25                                                              | 26                                                              | 27                                                              | 28                                                              | 29                                                              | 30                                                              | 31                                                              | 32                                                              | 33                                                              | 34                                                              | 35                                                              | 36                                                              | 37                                                              |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. |       | Final destination<br>(If intended future permanent residence) |                                                   | By whom was passage paid?                            | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend, state name and complete address, and if relative, exact relationship | Persons of same name in United States                           |                                                                 | Condition of health, mental and physical                        | Deformed or crippled                                            | Height                                                          | Color of                                                        | Complexion                                                      | Markings of identification                                      |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |
|             | Foreign country                                                                                                                                            | State | City or town                                                  | Whether having a ticket to each final destination | Whether in possession of \$50. and if not, how much? | Year or period of years                                              | Where?                                                                                                           | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? | Do you know of any other persons of same name in United States? |
| 1           | Wilhelms st. no. 3 Oslo, Norway                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 2           | Petrik Larsen                                                                                                                                              |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 3           | Hallingen pr. Lillestrom, Norway                                                                                                                           |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 4           | Bogen pr. Svelvik, Norway                                                                                                                                  |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 5           | Oslo                                                                                                                                                       |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 6           |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 7           |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 8           |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 9           |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 10          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 11          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 12          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 13          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 14          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 15          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 16          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 17          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 18          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 19          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 20          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 21          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 22          |                                                                                                                                                            |       |                                                               | No                                                | Self                                                 | Yes                                                                  | Oslo                                                                                                             | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              | No                                                              |
| 23          |                                                                                                                                                            |       |                                                               |                                                   |                                                      |                                                                      |                                                                                                                  |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |                                                                 |



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Hector Saarnu Aker <sup>Master</sup> of the Nor. m/s Fanny Heng from Malmö, Sweden, do solemnly, sincerely, and truly swear that ~~I have caused the surgeon of said vessel to examine each and all of the aliens named in the foregoing Lists or Manifest Sheets, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.~~

H. C. Saarnu

Officer.

Sworn to before me this 31<sup>st</sup> day of August, 1933, at Philadelphia, Pa.

Lee B. Telch  
Immigration Officer.

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

These instructions are to be read by the master or commanding officer of every vessel arriving at a port of call in the United States, and by the immigration officer at such port. They are to be read to the crew of the vessel, and the master or commanding officer is to see that they are understood. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call.

1. The master or commanding officer of every vessel arriving at a port of call in the United States, and by the immigration officer at such port. They are to be read to the crew of the vessel, and the master or commanding officer is to see that they are understood. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call.

2. The master or commanding officer of every vessel arriving at a port of call in the United States, and by the immigration officer at such port. They are to be read to the crew of the vessel, and the master or commanding officer is to see that they are understood. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call.

3. The master or commanding officer of every vessel arriving at a port of call in the United States, and by the immigration officer at such port. They are to be read to the crew of the vessel, and the master or commanding officer is to see that they are understood. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call.

4. The master or commanding officer of every vessel arriving at a port of call in the United States, and by the immigration officer at such port. They are to be read to the crew of the vessel, and the master or commanding officer is to see that they are understood. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call. The master or commanding officer is to see that the manifest is prepared in accordance with these instructions, and that it is filed with the immigration officer at the port of call.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1.

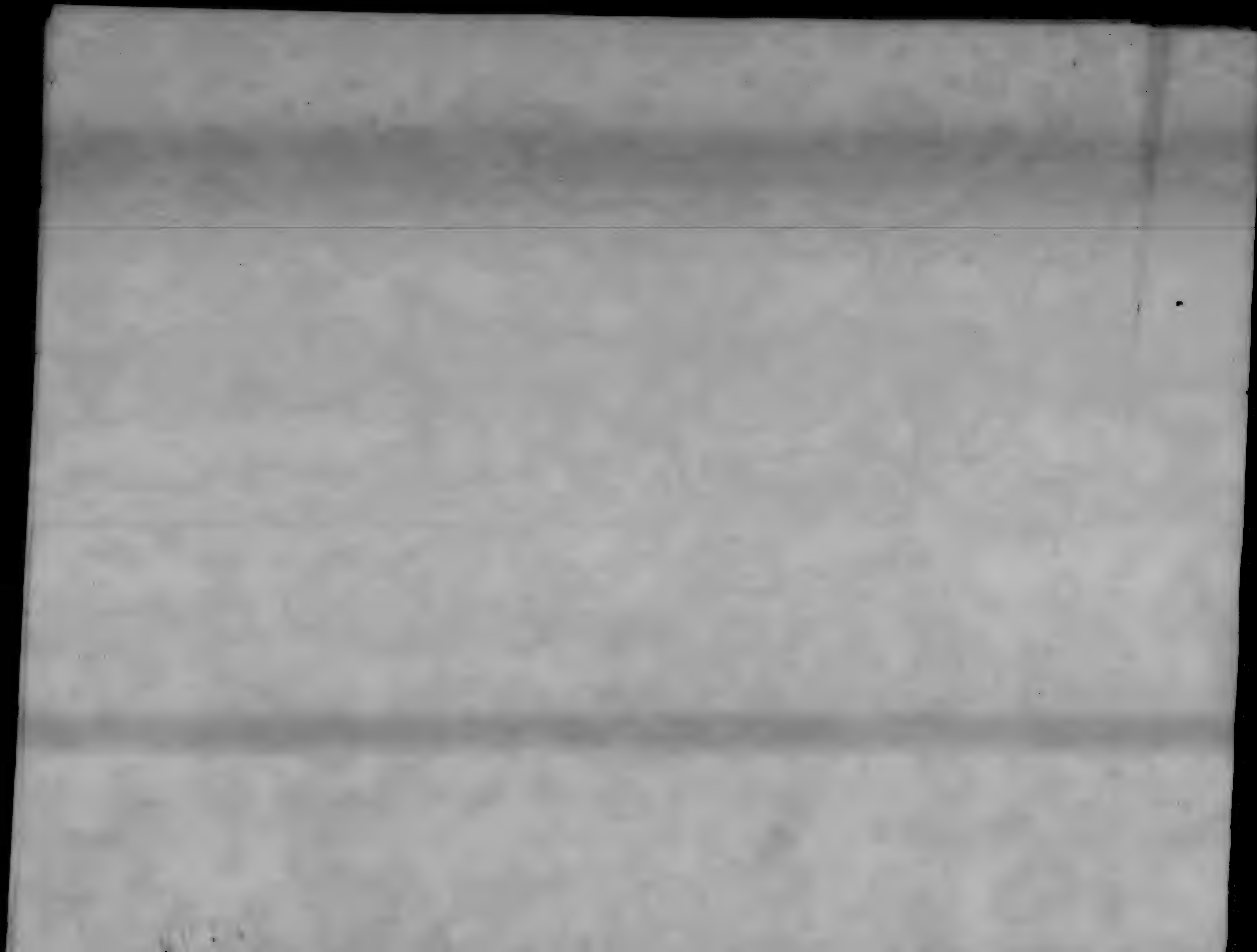
# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "CARRILLO" sailing from PORTS AS LISTED BELOW AS BELOW, 19, Arriving at Port of PHILADELPHIA, PA. SEPTEMBER 1, 1935

| No. on List                                                 | NAME IN FULL  |               | AGE | SEX | MARRIED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-------------------------------------------------------------|---------------|---------------|-----|-----|-------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------|
|                                                             | FAMILY NAME   | GIVEN NAME    |     |     |                   |                                                                                                                                    |                                                                                                        |                                         |
| PASSENGERS EMBARKED AT PHILADELPHIA, PA. AUGUST 19, 1935.   |               |               |     |     |                   |                                                                                                                                    |                                                                                                        |                                         |
| 1                                                           | BLACK         | JOHN E.       | 41  | M   | M                 | Lowell, Mass.                                                                                                                      | October 29, 1894                                                                                       | 3800 Albemarle, Washington, D.C.        |
| 2                                                           | ROLL          | ELIZABETH W.  | 51  | F   | W                 | Philadelphia, Pa.                                                                                                                  | November 24, 1884                                                                                      | 1024 Eaddon Av, Camden, N.J.            |
| 3                                                           | GOLDMAN       | IR SAMUEL     | 38  | M   | M                 | Philadelphia, Pa.                                                                                                                  | November 4, 1896                                                                                       | 623 W. Fishers Av, Philadelphia, Pa.    |
| 4                                                           | GOLDMAN       | BERTHA E.     | 35  | F   | M                 | Brooklyn, N.Y.                                                                                                                     | November 3rd 1899                                                                                      | with Husband above                      |
| 5                                                           | GOLDMAN       | MARYLEAH      | 25  | F   | S                 | Trenton, N.J.                                                                                                                      | April 29, 1910                                                                                         | 226 Jackson St, Trenton, N.J.           |
| 6                                                           | HAVRE         | MARVIN T.     | 32  | M   | S                 | Cleveland, Ohio.                                                                                                                   | August 27, 1902                                                                                        | 2677 Euclid Blvd, Cleveland, Ohio.      |
| 7                                                           | HEERMANOX     | PAULINE       | 53  | F   | S                 | Yonkers, N.Y.                                                                                                                      | May 17, 1882                                                                                           | 69 N. Franklin St, Wilkes-Barre, Pa.    |
| 8                                                           | HIGES         | LYNNELL       | 49  | M   | S                 | Sanforth, Maine.                                                                                                                   | July 9, 1886                                                                                           | Hickoff, New Jersey.                    |
| 9                                                           | KOHN          | JULIA         | 65  | F   | M                 | New York, N.Y.                                                                                                                     | April 21, 1870                                                                                         | 1008 Summit Av, New York, N.Y.          |
| 10                                                          | KOHN          | MARY          | 43  | F   | S                 | New York, N.Y.                                                                                                                     | February 19, 1892                                                                                      | with Mother above.                      |
| 11                                                          | LEE           | THOMAS H.     | 45  | M   | M                 | Philadelphia, Pa.                                                                                                                  | May 30, 1890                                                                                           | Philadelphia, Pa.                       |
| 12                                                          | LIVINGSTON    | ALICE E.H.    | 57  | F   | M                 | Washington, D.C.                                                                                                                   | January 30, 1878                                                                                       | 604 Walnut Lane, Roxborough, D.C.       |
| 13                                                          | LORENZ        | ANNE          | 29  | F   | S                 | Wellsboro, Pa.                                                                                                                     | June 6, 1906                                                                                           | 3432 Lowell St, N.W. Washington, D.C.   |
| 14                                                          | LOSTGARTEN    | LEE           | 36  | F   | S                 | New York, N.Y.                                                                                                                     | October 20, 1898                                                                                       | 1669 Ford St, Linwood, Pa.              |
| 15                                                          | MC GREW       | LILLIAN       | 37  | F   | S                 | Dodge-Leeds, Iowa                                                                                                                  | July 14, 1898                                                                                          | 193 East 12 St, New York, N.Y.          |
| 16                                                          | MILLER        | ELIZABETH W.  | 30  | F   | S                 | Worcester, Pa.                                                                                                                     | April 3, 1905                                                                                          | 430 Lexington Av, New York, N.Y.        |
| 17                                                          | WILLIGAN      | JOSEPHINA S.  | 42  | F   | M                 | Newark, N.J.                                                                                                                       | February 12, 1893                                                                                      | 114 East 22 St, Chester, Pa.            |
| 18                                                          | WILLIGAN      | GILBERT MC G. | 17  | M   | S                 | Born Montreal, Canada, of American Parents September 21, 1917.                                                                     |                                                                                                        | 67 Short Hills Av, Short Hills, N.J.    |
| 19                                                          | RIPLEY        | ELANOR        | 31  | F   | S                 | E. Providence, R.I.                                                                                                                | May 21, 1904                                                                                           | with Mother above.                      |
| 20                                                          | SATTERTHWAITE | A. LYMAN      | 35  | M   | M                 | Stanton, Delaware.                                                                                                                 | December 3, 1899                                                                                       | 220 East 11 St, New York, N.Y.          |
| 21                                                          | SATTERTHWAITE | HELEN S.      | 36  | F   | M                 | Philadelphia, Pa.                                                                                                                  | September 28, 1899                                                                                     | 1210 Delaware Av, Wilmington, Delaware. |
| 22                                                          | SHUTHERD      | GRACE H.      | 37  | F   | S                 | Philadelphia, Pa.                                                                                                                  | August 18, 1898                                                                                        | with Husband above.                     |
| 23                                                          | SULLIVAN      | MARY E.       | 49  | F   | M                 | Philadelphia, Pa.                                                                                                                  | August 15, 1887                                                                                        | 5612 N. Third St, Philadelphia, Pa.     |
| 24                                                          | SULLIVAN      | CATHERINE M.  | 24  | F   | S                 | Philadelphia, Pa.                                                                                                                  | March 4, 1911                                                                                          | 9 Penn Av, Collingswood, N.J.           |
| 25                                                          | TARLOWE       | JOSEPH D.     | 54  | M   | M                 | Southern District of New York February 9, 1923                                                                                     |                                                                                                        | with Mother above.                      |
| 26                                                          | TARLOWE       | BEATRICE E.   | 24  | F   | M                 | New York, N.Y.                                                                                                                     | February 10, 1909                                                                                      | 1611 Nelson Av, New York, N.Y.          |
| 27                                                          | WACHSOLTZ     | LUCY S.       | 26  | F   | S                 | Brooklyn, N.Y.                                                                                                                     | June 30, 1910                                                                                          | with Husband above.                     |
| 28                                                          | WAPPEN        | LILLIAN       | 27  | F   | S                 | Naturalized through Father's papers, New York, N.Y. 1918                                                                           |                                                                                                        | N.J. 743 Walter Av, Eastbrook Heights,  |
| 29                                                          | ATKINSON      | MARGUERITE R. | 30  | F   | M                 | Mt. Carmel, Pa.                                                                                                                    | July 2, 1908                                                                                           | 88 Lambertson St, Trenton, N.J.         |
| 30                                                          | DE KINE       | LOUISE        | 37  | F   | S                 | Philadelphia, Pa.                                                                                                                  | January 27, 1898                                                                                       | 5622 No. 12 St, Philadelphia, Pa.       |
| PASSENGERS EMBARKED AT BARRIOS, GUATEMALA, AUGUST 25, 1935. |               |               |     |     |                   |                                                                                                                                    |                                                                                                        |                                         |
|                                                             |               |               |     |     |                   |                                                                                                                                    |                                                                                                        | Philadelphia, Pa.                       |
|                                                             |               |               |     |     |                   |                                                                                                                                    |                                                                                                        | 183 Mannheim St, Germantown.            |











Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

S. S. "CARRILLO"

sailing from BARRIOS, GUATEMALA.

AUGUST 25,

1935

Arriving at Port of

PHILADELPHIA, PA.

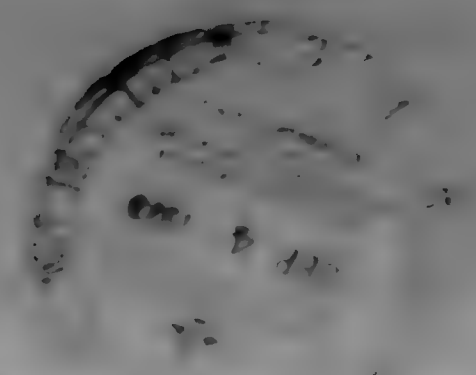
SEPT. 1,

1935

*See Philadelphia City Dir. 9/27/35*

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                         |
|-------------------|--------------|------------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 1                 | HERDLE       | ISABEL C.  | 30  | F S | Rochester, N.Y. June 5, 1905                                                                                                             |                                                                                                             | 19 Sumner Park, Rochester, N.Y.                  |
| 2                 | MANNING      | MABEL M.   | 45  | F S |                                                                                                                                          | District Court of Boston, Mass.<br>January 19, 1920                                                         | 63 Page Rd, Newtonville, Mass.                   |
| 3                 | MOYER        | REX L.     | 45  | M M | Oberlin, Ohio. September 9, 1900                                                                                                         |                                                                                                             | Madison, New Jersey.                             |
| 4                 | MOYER        | LOTTIE     | 45  | F M | Oklahoma City, Okla. March 31, 1900                                                                                                      |                                                                                                             | with Husband above.                              |
| 5                 | SPENCER      | ELLA       | 35  | F S | Merchantville, N.J. November 2, 1900                                                                                                     |                                                                                                             | New Jersey.<br>183 So. Center St, Merchantville. |
| 6                 |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 7                 |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 8                 |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 9                 |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 10                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 11                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 12                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 13                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 14                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 15                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 16                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 17                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 18                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 19                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 20                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 21                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 22                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 23                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 24                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 25                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 26                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 27                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 28                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 29                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |
| 30                |              |            |     |     |                                                                                                                                          |                                                                                                             |                                                  |







# AFFIDAVIT OF SURGEON

I, William Lundy, Surgeon of the U.S. Marshals, Ellisburg Prison, do solemnly, sincerely, and truly declare that I have had thirty seven years' experience as a Physician and Surgeon, and that I am qualified to practice as such by and under the authority of the State of New York, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, one in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Robert and Rebecca  
Sumner to Frances on this 18

~~Simon~~ before me this 25<sup>th</sup> day of August, 1978

William Lindsay  
J. med

*Francis Colquhoun*

### LIST OF NAMES OR PEOPLES

There are two different ways to proceed in the search for a weakly dominant strategy for Player 1 in this game. The natural way is to find strategies that are strictly dominated and then to eliminate them, one by one, until only one strategy remains. This procedure is called *iterative deletion of strictly dominated strategies*.

|                 |             |             |
|-----------------|-------------|-------------|
| African (Negro) | Black       | Blackman    |
| American        | Home        | Home        |
| Arabian         | Moorish     | Arabian     |
| Armenian        | Armenian    | Armenian    |
| Chinese         | Chinese     | Chinese     |
| English         | English     | English     |
| French          | French      | French      |
| German          | German      | German      |
| Indian          | Indian      | Indian      |
| Italian         | Italian     | Italian     |
| Japanese        | Japanese    | Japanese    |
| Korean          | Korean      | Korean      |
| Malay           | Malay       | Malay       |
| Mexican         | Mexican     | Mexican     |
| Negro           | Negro       | Negro       |
| Portuguese      | Portuguese  | Portuguese  |
| Russian         | Russian     | Russian     |
| Spanish         | Spanish     | Spanish     |
| Turkish         | Turkish     | Turkish     |
| Yugoslavian     | Yugoslavian | Yugoslavian |



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service at the port of arrival. This pink sheet is for the listing of

3520

*Passengers sailing from*

, 19

[illegible]



States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

The entries on this sheet must be typewritten or printed.

19

[illegible]



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Master, of the cu/s Storchow, from Gatzenburg, do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, three in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

In every respect,  
I remain  
Dear Sir,  
Yours truly,  
J. H. [Signature]

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

at

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 08-01-2001 BY 60322 UCBAW

Immigration Officer

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Separate tickets should be prepared for each part of each journey, probably in the United States, according to separate and detailed regulations as defined by the Immigration Act of 1917 and the consular authorities. Each ticket should be issued for a definite period, which should not be more than 12 months. All tickets should be issued for a definite period, which should not be more than 12 months. All tickets should be issued for a definite period, which should not be more than 12 months.

[illegible]

3. Comparison should be made between farmers and farm income equations of different countries.

It is important to note that the above information is for informational purposes only and should not be used as a basis for investment decisions. The information is not intended to constitute an offer of securities or any other financial product, and it is not intended to be relied upon as a basis for any investment decision. The information is provided for your general information only and should not be used as a basis for any investment decision.

CONCLUSION: The results of the present study indicate that the use of a computerized system for the management of patient information is a viable alternative to the traditional paper-based system. The system is easy to use and can be integrated with existing hospital information systems. The system can be used to manage patient information in a secure and efficient manner. The system can be used to manage patient information in a secure and efficient manner. The system can be used to manage patient information in a secure and efficient manner.

Section 10. (a) The amount of Section 9 shall be increased to make the number of votes equal to a quorum or majority.

[illegible]

<sup>1</sup>The terms "Cultural" and "Art" in the title of this paper are just suggestive.

778-1-1-1-1

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

67-45-47 45-52 45

Figure 2. Sampling points in the ponds of the wet and dry season (a) and (b).

7-10-68

The genus *Chrysomela* is distinguished from *Chrysomela* by the presence of the black spots on the sides of the thorax and the black spots on the sides of the abdomen. The black spots on the sides of the thorax are arranged in a row, and the black spots on the sides of the abdomen are arranged in a row. The black spots on the sides of the thorax are arranged in a row, and the black spots on the sides of the abdomen are arranged in a row.

Figure 11 shows a series of three photographs of the same area, taken at different times, illustrating the changes in the vegetation over time.

Journal of the American Statistical Association, 72 (1977), 102-103. An appropriate reference is made to the Linear Transformation Test. Numerous references are given. Chapter 10 is devoted to  $\chi^2$  and other distributions of the linear form. An *Index* follows in the last 4 pages.

**Comment 24** The authors do not reference the planned date of implementation of the proposed changes to the existing rule, and it will be assumed.

**Column 15. (Lost personal production.)**—Amount or an estimated portion of the 1996 gross marketing permanent production. The lost quantity is shown, with a note such as "Amount of estimated loss lost or more than the loss is known" (see column 16) or "Amount of estimated loss lost or more than the loss is known" (see column 16).

the results of the 1992 elections, perhaps, are evidence of that permanent transition. It is important for educational researchers that, eventually, providing a permanent flow transfer of their permanent wealth to independent of transfer of resources within society, in Africa, particularly, is vital.

University of East Tennessee, Johnson City, Tennessee 37601

[illegible]

Continued in column 2, page 2.—The answer to your question about the national income comparison requires an extended analysis of the data, and only a preliminary statement. The ratio should not be taken too literally, but it is a rough guide to the relative importance of the two countries.

For the purpose of this study, the following definitions were used:

- Dependent variable:** The dependent variable was the level of knowledge about the use of the Internet for health information.
- Independent variable:** The independent variable was the level of knowledge about the use of the Internet for health information.
- Control variable:** The control variable was the level of knowledge about the use of the Internet for health information.

1. [Caption] 20. 128 cells were present per ... The ... should show ... in ... per ... per ...

Column 10: Indicate your letters to the Federal Reserve and to the relevant state or local government agency.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

"Ames,"

S. S.

"S. A. G. U. A."

Sailing from

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

ALVARO, OREGON, TABASCO MEXICO. AUG. 28, 1923

Arriving at Port of

PHILADELPHIA, PA.

SEPT 3rd., 1923

| No.<br>of<br>List. | NAME IN FULL  |                           | AGE  |      | SEX | MARRIED<br>OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES          |
|--------------------|---------------|---------------------------|------|------|-----|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------|
|                    | FAMILY NAME.  | GIVEN NAME.               | Yrs. | Mos. |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 1                  | WHEELER       | LUCILLE                   | 31   | 3    | F   | S                       | May 30th. 1904 Buffalo. New York                                                                                                          |                                                                                                               |                                   |
| 2                  | Furman        | Wallace                   | 36   | 2    | M   | M                       | July 10th. 1897 New York City                                                                                                             |                                                                                                               | 490 Riverside Drive New York City |
| 3                  | Furman        | Kathryn                   | 34   | 8    | F   | M                       | January 1st. 1901. Hornell New York                                                                                                       |                                                                                                               | 517 W. 113th. St. New York City   |
| 4                  | Satterthwaite | Willis                    | 29   | 6    | M   | M                       | February 25th. 1906, Trenton N.J.                                                                                                         |                                                                                                               | 517 W. 113th. St. New York City   |
| 5                  | Satterthwaite | Margaret                  | 29   | 1    | F   | M                       | July 10th. 1906, Trenton N.J.                                                                                                             |                                                                                                               | 1826 Pine St. Philadelphia Pa.    |
| 6                  | Porter        | Joseph                    | 31   | 9    | M   | S                       | Nov. 16th. 1903. Reading Pa.                                                                                                              |                                                                                                               | 1826 Pine St. Philadelphia Pa.    |
| 7                  | Till          | Ray, A.                   | 46   | 7    | F   | S                       | February 5th. 1889, Reading Pa.                                                                                                           |                                                                                                               | 437 S. 7th. St. Reading Pa.       |
| 8                  |               | Lee B. Dolch              |      |      |     |                         |                                                                                                                                           |                                                                                                               | Hotel Versailles New York City.   |
| 9                  |               | U. S. IMMIGRANT INSPECTOR |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 10                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 11                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 12                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 13                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 14                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 15                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 16                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 17                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 18                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 19                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 20                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 21                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 22                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 23                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 24                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 25                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 26                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 27                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 28                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 29                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |
| 30                 |               |                           |      |      |     |                         |                                                                                                                                           |                                                                                                               |                                   |







## AFFIDAVIT OF SURGEON

I, Louis F. Rodriguez Wheat, Surgeon of the \_\_\_\_\_, <sup>Assistant</sup> ~~Assistant~~ <sup>Doctor</sup> ~~Doctor~~, do solemnly, sincerely, and truly swear that I have had 22 years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of CUBAN GOVERNMENT MEDICAL AND OF CUBA, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, 2-2 in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Sworn to before me this 25<sup>th</sup> day of August  
at St. Louis, Mo. 1884

Myriophyllum var. 1

## LIST OF RACES OR PEOPLES

[illegible]







States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

The entries on this sheet must be typewritten or printed.

[illegible]



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Master of the S/S Cadmus from Baracoa, Cuba, do solemnly swear and say that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing List or Manifest Sheet, one in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said List or Manifest concerning each of said aliens named therein is correct and true in every respect.

Carita, Juan  
Master

Subscribed and sworn to before me this 5 day of September, 1935  
at Manzanillo  
Louis F. Nelson  
Notary Public for the State of California

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

1. Manifests should be prepared for each port of call. The manifest should be in the form of a book containing a separate sheet for each alien. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office.

2. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office.

3. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office. The manifest should be prepared in duplicate, one copy to be retained by the vessel and the other copy to be forwarded to the nearest immigration office.



## AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at

*Name*—If a specimen with this name, the address of the collector(s) and a personal letter or statement about its origin and any changes that may have occurred, is sent, the specimen is accepted. If this information is not sent, it is not accepted, even if the specimen is accepted.

*How specimens are made good*—The address of the collector(s) and a personal letter or statement about its origin and any changes that may have occurred, is sent.

## LIST OF PAGES OR PEOPLE

Each of these "costs" is covered by the stock fund which always grows and declines with the market. The shareholders are not liable for any losses of the company except the money they put in to fund the account. In other words, the shareholders are

[illegible]



3522

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.

Her.  
S. S. Winnetou

Passengers sailing from Antilla, Cuba - , August 30, 1935

U. S. DEPARTMENT OF AGRICULTURE

Local Agents:  
Chas. Kury & Co.,  
119 So. 4<sup>th</sup> St.,  
Philadelphia, Pa.



States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

The entries on this sheet must be typewritten or printed.

, September 5, 1935,

3rd class  
C. M. S. S. S.  
A. M. S. S. S.



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Fritz Steinhaus - Master, of the M/s/s Winnerton, from Antilla, Cuba, do solemnly, sincerely, and truly swear - that I have caused the ~~signature of said vessel sailing therewith, or the master employed by the owner thereof to make a proper and correct declaration of each and all of the aliens named in the foregoing Lists or Manifest Sheets,~~ <sup>1</sup> in number, and that from the report of said customs and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and ~~true in every respect.~~

and every respect.

*Thomas*  
Master Officer.

Sworn to before me this  
at Philadelphia, Pa.

5th day of September 1925

Lee B. Dolch  
Illustration of a ship

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

[illegible][illegible]



# AFFIDAVIT OF SURGEON

I, JOSEPH GRABENSTEIN, Surgeon of the S.S. "ATENAS", SAILING THEREWITH, do solemnly, sincerely, and truly SWEAR that I have had THIRTY-TWO years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of THE STATE OF NEW YORK, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

*Joseph Grabenstein*

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
at \_\_\_\_\_

## LIST OF NAMES OF PEOPLES

These are the names of the people who are on board the ship, and who are subject to the laws of the United States, and who are to be examined by the Surgeon.

|     |     |     |
|-----|-----|-----|
| 1   | 2   | 3   |
| 4   | 5   | 6   |
| 7   | 8   | 9   |
| 10  | 11  | 12  |
| 13  | 14  | 15  |
| 16  | 17  | 18  |
| 19  | 20  | 21  |
| 22  | 23  | 24  |
| 25  | 26  | 27  |
| 28  | 29  | 30  |
| 31  | 32  | 33  |
| 34  | 35  | 36  |
| 37  | 38  | 39  |
| 40  | 41  | 42  |
| 43  | 44  | 45  |
| 46  | 47  | 48  |
| 49  | 50  | 51  |
| 52  | 53  | 54  |
| 55  | 56  | 57  |
| 58  | 59  | 60  |
| 61  | 62  | 63  |
| 64  | 65  | 66  |
| 67  | 68  | 69  |
| 70  | 71  | 72  |
| 73  | 74  | 75  |
| 76  | 77  | 78  |
| 79  | 80  | 81  |
| 82  | 83  | 84  |
| 85  | 86  | 87  |
| 88  | 89  | 90  |
| 91  | 92  | 93  |
| 94  | 95  | 96  |
| 97  | 98  | 99  |
| 100 | 101 | 102 |







States, or a part of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigrant inspector.

**FIRST-CABIN PASSENGERS ONLY**

The entries on this sheet must be typewritten or printed.

**SEPTEMBER 8th**

1935.

| No.<br>on<br>list | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(If different from present residence)</small> | Whether having a ticket to such final destination | By whom was passage paid? | Whether at instance of U.S. consular officer, and if so, how much? | Whether ever before in the United States, and if so, where and when? | Whether going to join a relative or friend; state name and complete address, and relationship. | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization | Whether a member of a labor union | Whether a member of a political party | Whether a member of a religious sect | Whether a member of a secret society | Whether a member of a foreign government | Condition of health, mental and physical | Deformed or crippled, Nature, length of time, and cause | Height<br>Feet<br>Inches | Complexion | Color of Hair | Color of Eyes | Marks of identification |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------|---------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|-----------------------------------------------|-----------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|------------|---------------|---------------|-------------------------|
| 1                 | Wife Dominga, 9 C.L.#9,<br>Guatemala City, Guatemala                                                                                                       | Canada                                                                    | No                                                | Self                      | Yes Yes                                                            | Now Sept. 1928 York 1928                                             | None.<br>Intransit to Canada                                                                   | few<br>Yes dys.                    | No No                | No No No             | No No No                                      | No No No                          | Good                                  | No                                   | 6 2                                  | Fr. Gr.                                  | Blk.                                     | None                                                    |                          |            |               |               |                         |
| 2                 | With father - line #1<br>Faf Roberto, 7a. A.S.#24,<br>Guatemala City, Guatemala                                                                            | Canada                                                                    | No                                                | Father                    | Yes Yes                                                            | Now Sept. 1928 York 1928                                             | None.<br>Intransit to Canada                                                                   | few<br>Yes dys.                    | No No                | No No No             | No No No                                      | No No No                          | Good                                  | No                                   | 5 4                                  | Fr. Blk.                                 | Br.                                      | None                                                    |                          |            |               |               |                         |
| 3                 |                                                                                                                                                            | New York N.Y. Rochelle                                                    | No                                                | Self                      | Yes No                                                             |                                                                      | Aunt: Mrs. Alfred S. Clark,<br>190 Broadway Ave, New V<br>Rochelle, N.Y.                       | few<br>Yes yrs.                    | No No                | No No No             | No No No                                      | No No No                          | Good                                  | No                                   | 5 -                                  | Pr. Blk.                                 | Br.                                      | None                                                    |                          |            |               |               |                         |

3 alien - unregistered  
H H S & D M L



## AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, DAVIS E. KERR - MASTER, of the AMERICAN S.S. "ATENAS", from PTO. BARRIOS, GUATEMALA, do solemnly, sincerely, and truly SWEAR that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, THREE in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

L. E. Kern

MASTER. 05000

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

at

1. *Immunoglobulin G (IgG)*

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

Supports manifests should be prepared for each part of which payments are to be made. These should be prepared on separate transfers, assignments and assignments, as defined by the Finance Book Act of 1901, and they should be in separate manifests when they are made in the form of a check, and are not assigned to the same fund as the funds of Federal Affairs, and those which are not to be made in the form of a check. The sum of all payments of a fund, and those which are not to be made in the form of a check, should be made in the form of a check, and if they are in different forms, appropriate cross references should be made in the books of which the respective payments are made.

1. Common - consolidated national intelligence should underpin policy in 2015 and 2016.  
The idea of the use of intelligence affairs only.  
2. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
3. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
4. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
5. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
6. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
7. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
8. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
9. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
10. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
11. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
12. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
13. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
14. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
15. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
16. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
17. Common to the US and the UK is that a common agenda has developed in many of Britain has been appearing over the years of the past few years of the past few years.  
18. Common to the US</

The terms "children" relating to the children groups were approved.

As a result, the  $\beta$  values for the period of low  $M_2$  are lower than for the high  $M_2$  period.

<sup>1</sup> *Journal of American Studies*, vol. 22, pt. 2, 1988, pp. 239–54.

[illegible]

be active. As a result, we have not included any of the following in our model:

1. The first step is to identify the problem or goal. This involves understanding the current situation, identifying the problem, and setting a clear goal. The goal should be specific, measurable, achievable, relevant, and time-bound (SMART).

change the way we think about the world. The world is not a place, it is a process. It is a process of becoming, of change, of growth. It is a process of life, of death, of rebirth. It is a process of love, of hate, of passion, of desire. It is a process of joy, of sorrow, of hope, of despair. It is a process of everything, of nothing, of everything again.

Figure 10.11b illustrates the effect of the  $\beta$  parameter on the shape of the distribution. As  $\beta$  increases, the distribution becomes more skewed to the right.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

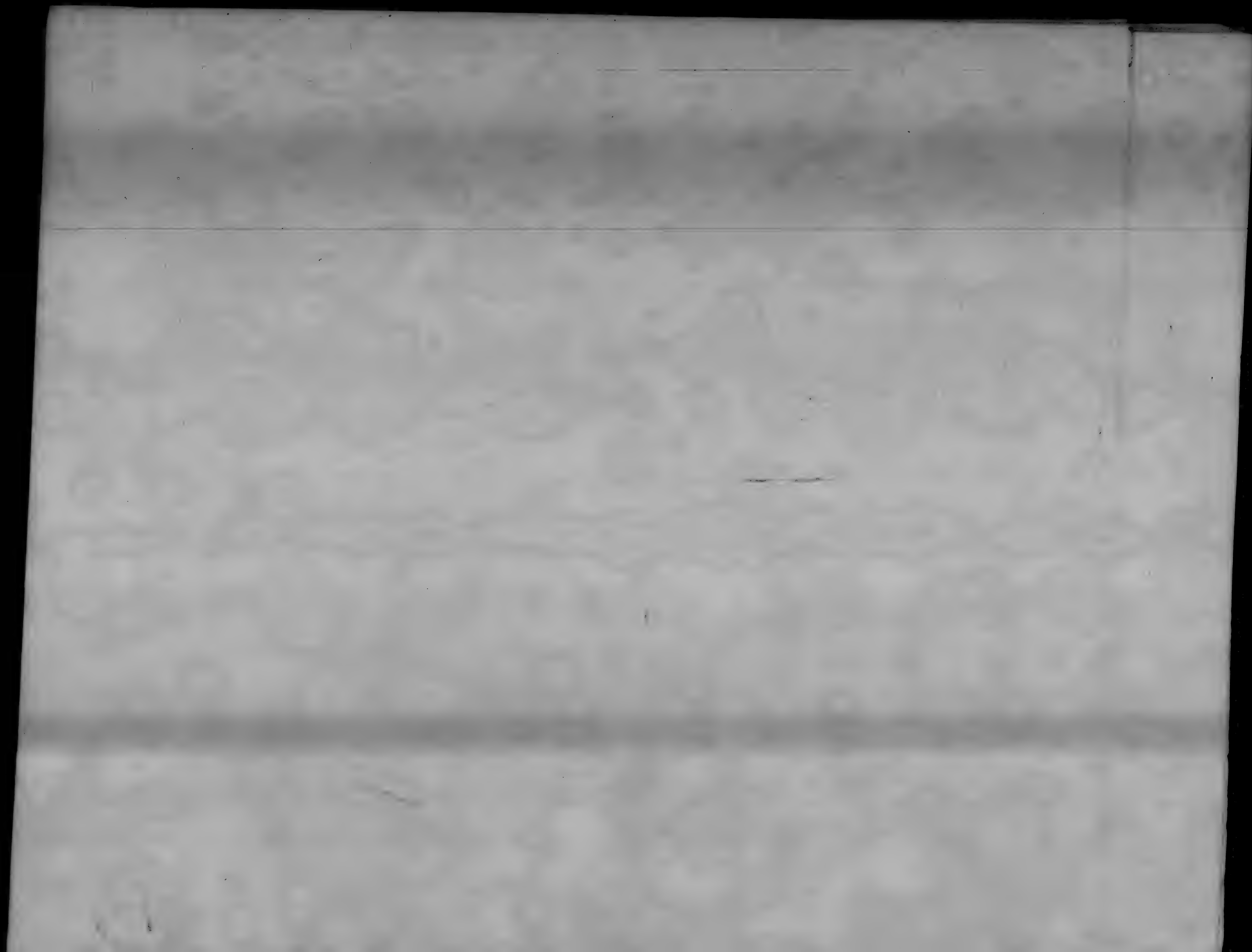
# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number 1

S. S. "ATENAS" sailing from PORTS AS BELOW, AS BELOW, 19, Arriving at Port of PHILADELPHIA, PA. VIA CHARLESTON, S.C. - SEPTEMBER 8th, 1935.

| No<br>on<br>List                                                     | NAME IN FULL |              | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                          |
|----------------------------------------------------------------------|--------------|--------------|-----|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
|                                                                      | FAMILY NAME  | GIVEN NAME   |     |     |                      |                                                                                                                                         |                                                                                                            |                                                   |
| PASSENGERS EMBARKED AT PHILADELPHIA, PA. - AUGUST 26th, 1935.        |              |              |     |     |                      |                                                                                                                                         |                                                                                                            |                                                   |
| 1                                                                    | Crist        | Aida         | 33  | F   | S                    | November 29, 1901. - Du Bois, Pa.                                                                                                       |                                                                                                            | Washington, D.C.<br>1739 Connecticut Ave. N.W., / |
| 2                                                                    | Covel        | Robert G.    | 42  | M   | M                    | May 29, 1893. - Naples, N.Y.                                                                                                            |                                                                                                            | 2501-17th St. N.W., Washington, D.C.              |
| 3                                                                    | Devlin       | Harry K.     | 48  | M   | M                    |                                                                                                                                         | By father's papers.                                                                                        | 440 E. 22nd St., Brooklyn, N.Y.                   |
| 4                                                                    | Devlin       | Florence M.  | 50  | F   | M                    | October 29, 1885. - Brooklyn, N.Y.                                                                                                      |                                                                                                            | do. do.                                           |
| 5                                                                    | Lee          | Francis W.S. | 65  | M   | M                    | June 30, 1870. - Philadelphia, Pa.                                                                                                      |                                                                                                            | 3827 Boardwalk, Atlantic City, N.J.               |
| 6                                                                    | Lee          | Beatrice     | 59  | F   | M                    | March 8, 1876. - Albany, N.Y.                                                                                                           |                                                                                                            | do. do.                                           |
| PASSENGERS EMBARKED AT PUERTO RICO, GUATEMALA - SEPTEMBER 1st, 1935. |              |              |     |     |                      |                                                                                                                                         |                                                                                                            |                                                   |
| 7                                                                    | Oifford      | Helen W.     | 42  | F   | S                    | August 5, 1893. - New Bedford, Mass.                                                                                                    |                                                                                                            | 290 W. 115th St., New York City                   |
| 8                                                                    | Jacobs       | Maurice S.   | 38  | M   | M                    | July 23, 1897. - Philadelphia, Pa.                                                                                                      |                                                                                                            | 6544 Ogonts Ave., Philadelphia, Pa.               |
| 9                                                                    | Jacobs       | Minnie B.    | 35  | F   | M                    | May 6, 1900. - Philadelphia, Pa.                                                                                                        |                                                                                                            | do. do.                                           |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Form 14.

"Amer"  
S. S.

"ORAWA"

Sailing from PHILADELPHIA PA.

DEPART 27th, 1935, Arriving at Port of PHILADELPHIA PA. SEPTEMBER 9th, 1935

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | MARRIED<br>or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF OTHER COUNTRY GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND DATE OF NATURALIZATION<br>With II give date of entry into U.S. and<br>date of date of papers |
|-------------------|--------------|------------|-----|-----|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                         |                                                                                                                                       |                                                                                                                           |
| 1                 | Clark        | William    | 27  | M   |                         | October 20th, 1892. Newark, N. J.                                                                                                     |                                                                                                                           |
| 2                 | DiBart       | John       | 24  | M   |                         | Nov. 10th, 1899. Newark, Pa.                                                                                                          |                                                                                                                           |
| 3                 | DiBart       | John       | 21  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 4                 | DiBart       | John       | 20  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 5                 | DiBart       | John       | 19  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 6                 | DiBart       | John       | 18  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 7                 | DiBart       | John       | 17  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 8                 | DiBart       | John       | 16  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 9                 | DiBart       | John       | 15  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 10                | DiBart       | John       | 14  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 11                | DiBart       | John       | 13  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 12                | DiBart       | John       | 12  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 13                | DiBart       | John       | 11  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 14                | DiBart       | John       | 10  | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 15                | DiBart       | John       | 9   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 16                | DiBart       | John       | 8   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 17                | DiBart       | John       | 7   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 18                | DiBart       | John       | 6   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 19                | DiBart       | John       | 5   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 20                | DiBart       | John       | 4   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 21                | DiBart       | John       | 3   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 22                | DiBart       | John       | 2   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 23                | DiBart       | John       | 1   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 24                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 25                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 26                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 27                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 28                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 29                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 30                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 31                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 32                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 33                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 34                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 35                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 36                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 37                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 38                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 39                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 40                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 41                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 42                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 43                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 44                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 45                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 46                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 47                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 48                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 49                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |
| 50                | DiBart       | John       | 0   | M   |                         | Nov. 10, 1899. Philadelphia, Pa.                                                                                                      |                                                                                                                           |



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

WY. 14.

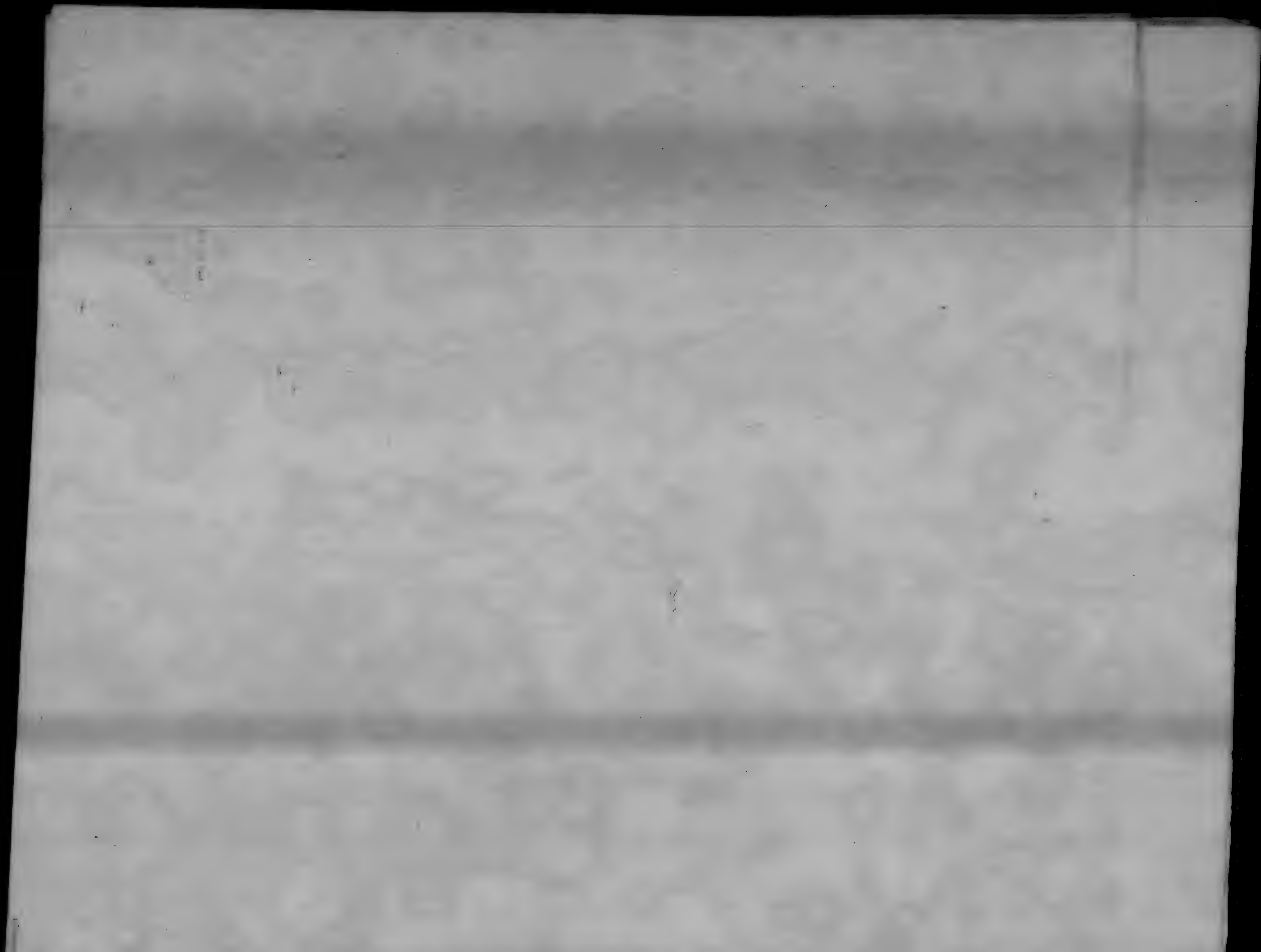
S. S. "GRANADA"

Sailing from PHILADELPHIA, PA., AUGUST 27TH, 1935, Arriving at Port of PHILADELPHIA, PA., SEPTEMBER 2TH, 1935.

| No. on List | NAME IN FULL<br>Family Name Given Name | AGE<br>Yrs. Mos.                          | Sex | MAILED OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS. | ADDRESS IN UNITED STATES.          |
|-------------|----------------------------------------|-------------------------------------------|-----|------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------|
| 1           | Bortolet                               | Mathilde                                  | 24  | F                | Sept. 10, 1900. Plandon, Pa.                                                                                                        |                                                                                                         | 301 N. 14th St., Phila., Pa.       |
| 2           | Bickel                                 | Anne                                      | 38  | F                | Feb. 18, 1907 Philadelphia, Pa.                                                                                                     |                                                                                                         | 4914 Locust St. Phila., Pa.        |
| 3           | Stanion                                | Geo. P.                                   | 47  | M                | Jan. 17, 1900 Wilson, Mass.                                                                                                         |                                                                                                         | 230 Murray St. Richmond, Va.       |
| 4           | Brenckmiller                           | Isidore                                   | 31  | M                | Jan. 1, 1904 Kansas Mo. Co.                                                                                                         |                                                                                                         | Rich., of Va. Charlottesville, Va. |
| 5           | (Smiley) Director<br>Crisis Staff.     | Lee D. Lohch<br>U. S. IMMIGRANT INSPECTOR |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 6           |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 7           |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 8           |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 9           |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 10          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 11          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 12          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 13          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 14          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 15          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 16          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 17          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 18          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 19          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 20          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 21          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 22          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 23          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 24          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 25          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 26          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 27          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 28          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 29          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |
| 30          |                                        |                                           |     |                  |                                                                                                                                     |                                                                                                         |                                    |

Chas. G. Hill  
Master







LIST OF UNITED STATES CITIZENS

Form 542  
U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

REPORT on Diseases, Injuries, Births, and Deaths during the voyage among the passengers of the S. S. "IRAWA"

arriving at the

Port of

PHILADELPHIA PA.

on

SEPTEMBER

27th

19

35.

| NAME         | SEX | AGE | NATIVITY | CLASS         | PASSENGER         | DIAGNOSIS | PRESENT           | REMARKS | This column reserved for U. S. Medical Examination | In this column Inspectors will note if necessary |
|--------------|-----|-----|----------|---------------|-------------------|-----------|-------------------|---------|----------------------------------------------------|--------------------------------------------------|
| (Print Name) |     |     |          | (Print Class) | (Print Passenger) |           | (Print Condition) |         |                                                    |                                                  |

None

None

RECEIVED

SEP 9 1935

U. S. DEPARTMENT OF LABOR

IMMIGRATION SERVICE

PHILADELPHIA DIVISION

RECEIVED

To the U. S. Commissioner of Immigration:

I hereby declare that no person on the above vessel was afflicted by any contagious disease or was suffering from any disease, injury, birth, or death during the voyage.

Signed: (Inspector)

*Edmund J. [Signature]*

For the U. S. Commissioner of Immigration: (Signature) \_\_\_\_\_



U. S. DEPARTMENT OF LABOR  
BUREAU OF IMMIGRATION  
WASHINGTON

## INSTRUCTIONS.

Under the authority of a resolution of the United States Congress of February 8, 1912, it is hereby directed that in the event of a ship belonging to another than a foreign party to any part of the United States the alleged piracy, which having its origin in the United States, is manifestly of this country, or has acquired sponsorship, a complete report of the persons, including manifestations of opinion, opinion, or hostility, injuries, deaths, and deaths which have occurred among the passengers during the voyage.

Said report shall state in plain language the name of the passenger concerned, whether a first class, second class, or steerage passenger or stowaway, the type or number used to indicate the class of the passenger, whether on ship, the said passenger's name as it is found and the number indicating the position of his name on board, the nature of the illness or injury from which he is suffering and the actual position of the case of arrival (e. g., "steerage", "second class", "first class").

[illegible]

Students and all other students appearing in and around must be written in English, if the day is known to many familiar with another language. The also a common shall furthermore declare on oath that it is the last of his knowledge and belief his report, as herein presented, contains a true and complete statement of all the names, names, names and deaths which have occurred during the voyage.

When a communication of transportation at the various parts of the United States has first commenced to permit the transshipment of the goods from one ship until the ship's engine, or, in like thereof, the master of the ship shall have furnished a certified receipt as above required.

January 1, 1970  
January 1, 1970

<sup>a</sup> Approximate number of birds at each colony.[illegible]

There is a growing interest in the use of the Internet for the dissemination of information, and the Internet is becoming a major source of information for many people. The Internet is a global network of computers that are connected to each other, allowing them to share information and resources. The Internet is used for a wide variety of purposes, including communication, education, entertainment, and business. The Internet is a powerful tool that has revolutionized the way we live and work.

[illegible]

Les auteurs de cet ouvrage ont travaillé pendant plusieurs années à la mise au point de ce manuel. Ils ont été aidés par de nombreux collègues et amis. Ils tiennent à remercier tout particulièrement les membres du jury de l'Université de Caen pour leur accueil et leur confiance.

<sup>1</sup> The authors of this paper thank the referees for their helpful comments and suggestions. The authors also thank the participants at the 2005 Annual Meeting of the European Association of Agricultural Economists for their helpful comments and suggestions.

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 http://jme.sagepub.com  
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<sup>6</sup> See, e.g., the discussion of the Tenth Amendment in *McCulloch v. Maryland*, 17 U.S. 319 (1803), and *United States v. Eakin*, 12 F. Cas. 123 (C.C.D. Pa., 1825).

[illegible][illegible]

U. S. DEPARTMENT OF LABOR  
IMMIGRATION SERVICE

Arrived September 9th, 1955. 1955

Alfred N. D.

**Diseases, Injuries, Births, and Deaths,  
during the voyage.**

Die Form sowohl als andere in diesem Besichte charakteristische Merkmalen unserer (westl.) geograph. Alter sind notwendig Weise in der europäischen Sprache abgeleitet aus. Besonders zeigt der Art 24. Hier kommt's wieder zu gewissen auf Deutschem ausdruck des Wortes.

Die Stillestimmung, die immer unter Bild erblüht, ist das, was es nach einem kurzen Wachen und Wachen, eine nachkommende, vollkommene Darstellung gibt, unter der Krankheit, Fieber, Geburt, und Tod, und die, was es nach dem Leben zu verstehen.

Die Einwanderungskommissionen in den verschiedenen Halbkugeln der Vereinigten Staaten haben sich bemüht, das Problem der Immigration zu behandeln bei der Schließung, aber an einem Stelle der Selbstbehauptung, einem wirtschaftlichen, sowie bei administrativen, bei der, aber, ohne primären Bestimmungen entsprechen.

Our comments & answers are addressed to him & to you & to him

[illegible][illegible]

<sup>1</sup> See, for instance, "Dramatic" in the collection of his last two discographies, collected together in a single box set, "The Complete Recordings of Louis Armstrong" (New York: RCA, 1999), CD 1, track 10, "Dramatic." The title of this recording is a reference to the title of the 1930 film *Dramatic* (directed by Lewis Allen), in which Armstrong played the character of a jazz musician who becomes a star.

<sup>1</sup> The literature on the social impacts of water stress is not extensive. Korman and Korman (1999), for example, note that the literature on the social impacts of water stress is limited, and that the literature on the social impacts of water stress is limited.

The authors do not have any financial interest in the products or services mentioned in this manuscript.

<sup>1</sup> The Transatlantic Transportation and Express Service has given priority of shipping to immigrants in the United States, and has also given priority to immigrants in the United States.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

LIST OF UNITED STATES CITIZENS  
(FOR THE IMMIGRATION AUTHORITIES)

Number

S. S.

Cuba

sailing from

Alvarado, Mex.

Sept 5, 1935

Arriving at Port of Philadelphia

Sept 11, 1935

No.  
on  
List

NAME IN FULL

AGE

MARRIED OR  
SINGLE

IF NATIVE OF UNITED STATES INSULAR POSSESSION OR  
IF NATIVE OF UNITED STATES, GIVE DATE AND  
PLACE OF BIRTH, CITY OR TOWN AND STATE.

IF NATURALIZED, GIVE NAME AND LOCATION OF COURT  
WHICH ISSUED NATURALIZATION PAPERS,  
AND DATE OF PAPERS.

ADDRESS IN UNITED STATES

FAMILY NAME

GIVEN NAME

YRS. MARR.

1. Newman

Barnes

25

born Feb 2, 1910

Philadelphia, Pa.

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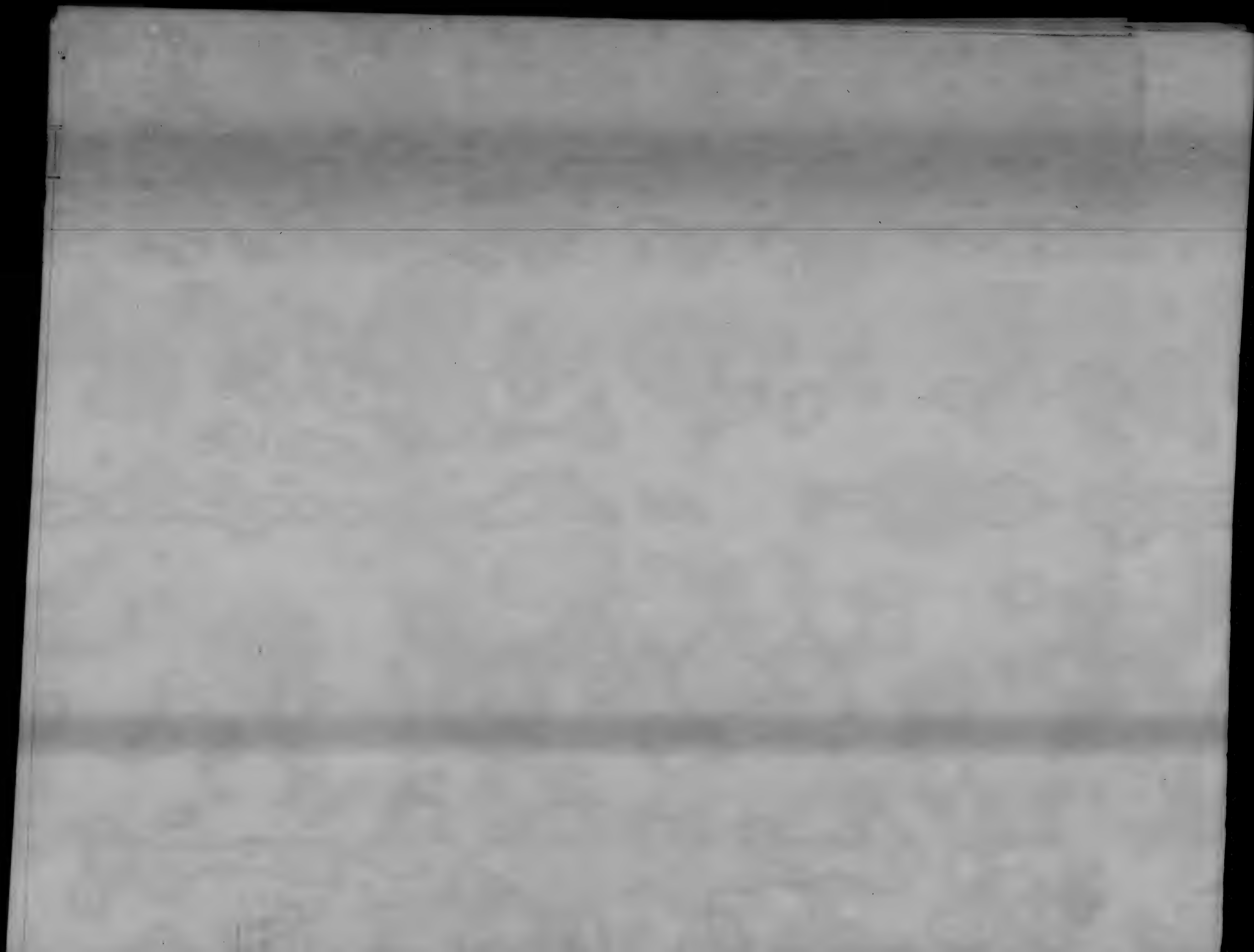
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U. S. IMMIGRANT INSPECTOR







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number 1

S. S.

sailing from

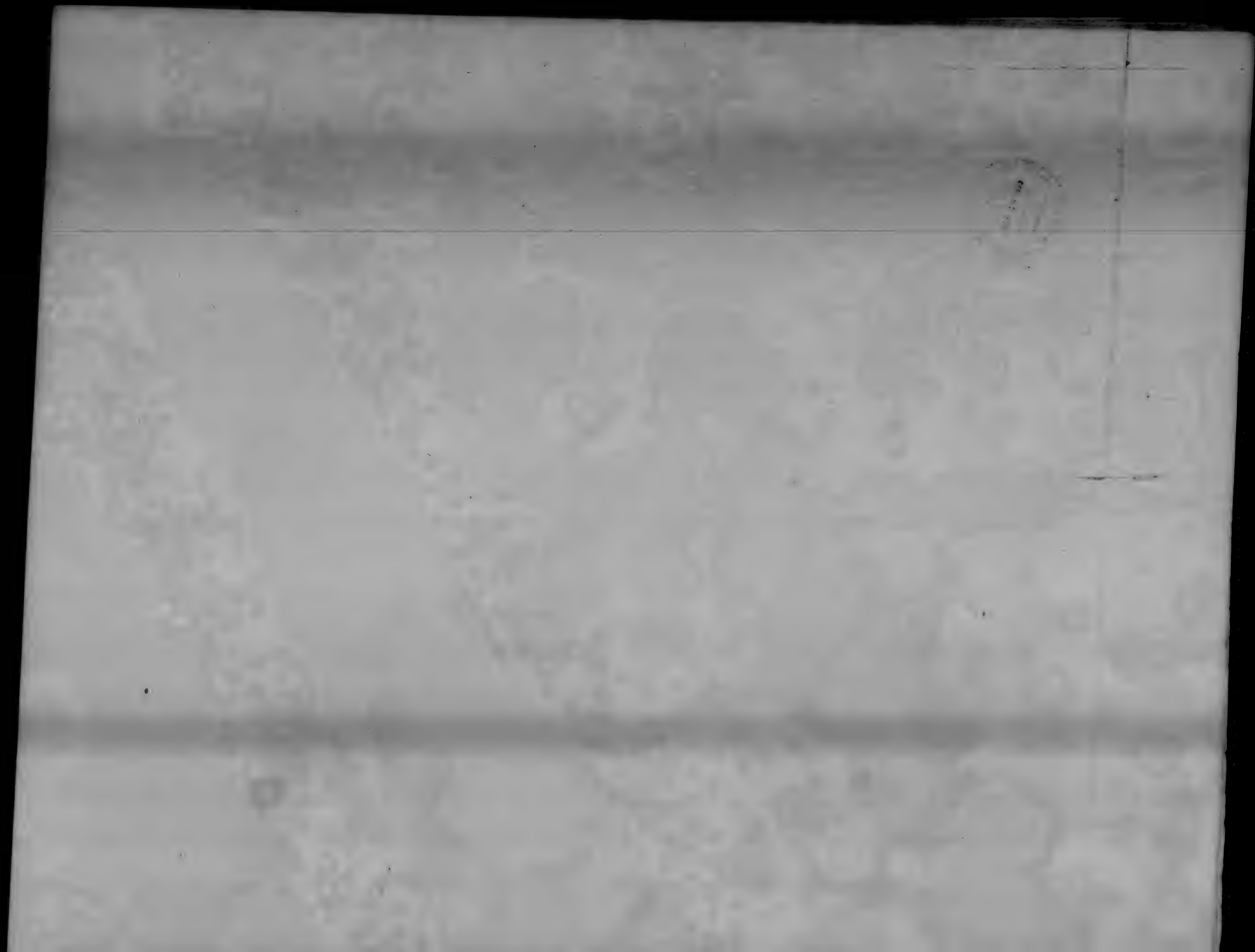
19<sup>th</sup>

Arriving at Port of

September 11, 19<sup>th</sup>

| No.<br>on<br>List | NAME IN FULL |            | AGE  |     | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR IF NATIVE OF UNITED STATES, GIVE DATE AND PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mo. |     |                                                                                                                                    |                                                                                                        |                          |
| 1                 |              |            |      |     |     |                                                                                                                                    |                                                                                                        |                          |
| 2                 |              |            |      |     |     |                                                                                                                                    |                                                                                                        |                          |
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| 22                |              |            |      |     |     |                                                                                                                                    |                                                                                                        |                          |
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| 48                |              |            |      |     |     |                                                                                                                                    |                                                                                                        |                          |
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| 50                |              |            |      |     |     |                                                                                                                                    |                                                                                                        |                          |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number 2

S. S. "PARANA" (American)

sailing from San Juan, Puerto Rico

September 7, 1935

Arriving at Port of Philadelphia, Pa., September 16, 1935

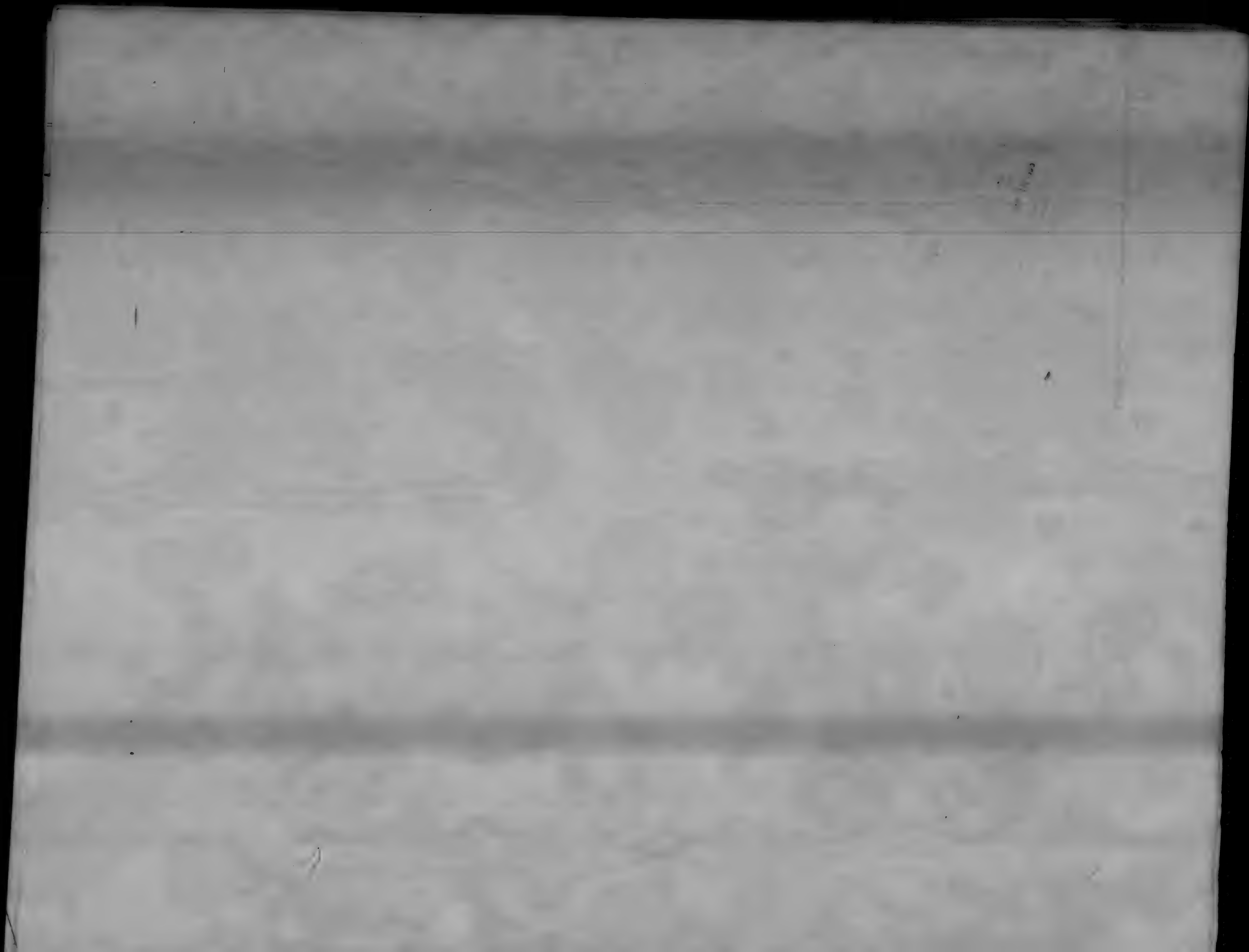
| No.<br>of<br>List | NAME IN FULL    |                  | AGE |     | Sex | MARRIED<br>or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES                  |
|-------------------|-----------------|------------------|-----|-----|-----|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------|
|                   | FAMILY NAME     | Given Name       | Yr. | Mo. |     |                         |                                                                                                                                          |                                                                                                              |                                           |
| 1                 | Landron         | Milda Maria      | ✓   | 8   | -   | F.                      | San Juan, P. R., August 24, 1929 ✓                                                                                                       |                                                                                                              | Plaza Hotel, Philadelphia, Pa. ✓          |
| 2                 | Landron         | Myra             | ✓   | 2   | -   | F.                      | San Juan, P. R., October 31, 1933 ✓                                                                                                      |                                                                                                              | do. ✓                                     |
| 3                 | Landron         | Ada Laron        | ✓   | 6   | -   | F.                      | San Juan, P. R., February 19, 1936 ✓                                                                                                     |                                                                                                              | do. ✓                                     |
| 4                 | Lopez           | Hilton Francisco | ✓   | 23  | -   | M.                      | Mayaguez, P. R., June 5, 1912 ✓                                                                                                          | District Court, San Juan, P. R., August 1922                                                                 | 908 Cathedral St., Baltimore, Md. ✓       |
| 5                 | Hartines Cortes | Josefina         | ✓   | 23  | -   | F.                      | Ponce, P. R., July 14, 1911 ✓                                                                                                            |                                                                                                              | 122 Wilkes St., Baltimore, Md. ✓          |
| 6                 | Vandee          | Irma             | ✓   | 21  | -   | F.                      | San Juan, P. R., August 24, 1914 ✓                                                                                                       |                                                                                                              | McJury College, Milwaukee, Wis. ✓         |
| 7                 | Miller          | Pauline Jane     | ✓   | 30  | -   | F.                      | Indianapolis, Ind., January 31, 1888 ✓                                                                                                   |                                                                                                              | 27 E. 11th St., New York, N. Y. ✓         |
| 8                 | Miller          | Pauline Alice    | ✓   | 43  | -   | F.                      | San Juan, P. R., March 6, 1891 ✓                                                                                                         |                                                                                                              | do. ✓                                     |
| 9                 | Porter          | Pauline Jane     | ✓   | 12  | -   | F.                      | Washington, D. C., June 19, 1927 ✓                                                                                                       |                                                                                                              | York Hotel, Newark, N. J., N. Y. ✓        |
| 10                | Robert          | Pauline Jane     | ✓   | 20  | -   | F.                      | San Juan, P. R., October 8, 1915 ✓                                                                                                       |                                                                                                              | University of Maryland, Baltimore, Md. ✓  |
| 11                | Vandee          | Pauline          | ✓   | 27  | -   | F.                      | San Juan, P. R., September 8, 1908 ✓                                                                                                     |                                                                                                              | 1111 N. 10th St., Philadelphia, Pa. ✓     |
| 12                | Fassell         | Pauline          | ✓   | 11  | -   | F.                      | San Juan, P. R., January 20, 1927 ✓                                                                                                      |                                                                                                              | Nationality of Maryland, Baltimore, Md. ✓ |
| 13                | Wentley         | Pauline          | ✓   | 21  | -   | F.                      | San Juan, P. R., January 11, 1914 ✓                                                                                                      | Philadelphia, Pa., Sept. 7, 1925                                                                             | San Juan Hotel, San Juan, P. R. ✓         |
| 14                | Wentley         | Pauline          | ✓   | 11  | -   | F.                      | San Juan, P. R., January 20, 1927 ✓                                                                                                      |                                                                                                              | Plaza Hotel, Philadelphia, Pa. ✓          |
| 15                | Wentley         | Pauline          | ✓   | 21  | -   | F.                      | San Juan, P. R., January 11, 1914 ✓                                                                                                      |                                                                                                              | 214 Market St., New York, N. Y. ✓         |
| 16                | Wentley         | Pauline          | ✓   | 21  | -   | F.                      | San Juan, P. R., January 11, 1914 ✓                                                                                                      |                                                                                                              | do. ✓                                     |
| 17                | Wentley         | Pauline          | ✓   | 21  | -   | F.                      | San Juan, P. R., January 11, 1914 ✓                                                                                                      |                                                                                                              | Continental Hotel, Baltimore, Md. ✓       |

Lee D. Dole

U. S. Immigration Service

*[Signature]*  
Director, U. S. Immigration Service







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number 3

S. S.

sailing from

San Juan, Puerto Rico

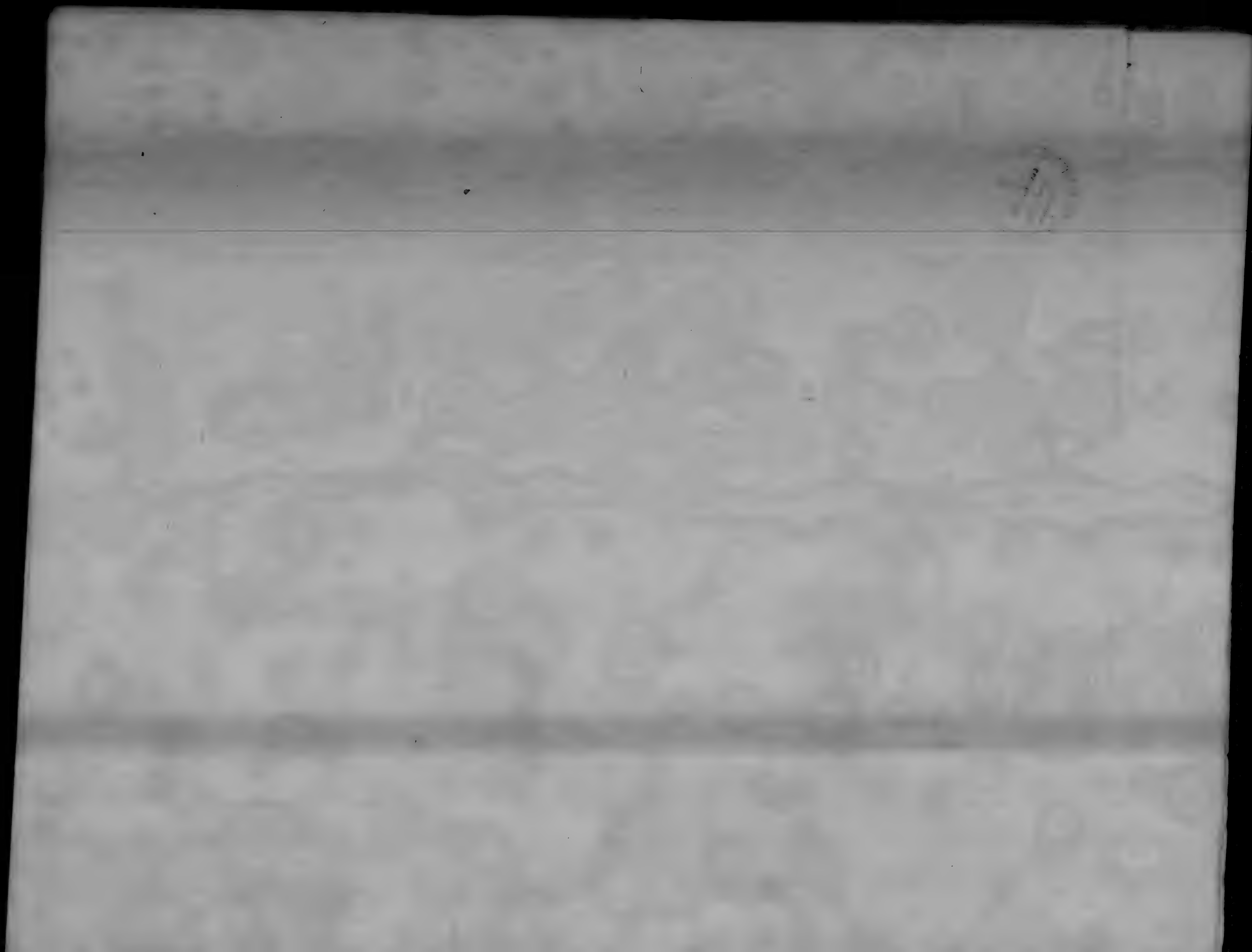
, 19<sup>25</sup>

Arriving at Port of

Philadelphia, Pa. Sept. 11, 19<sup>25</sup>

| No.<br>on<br>List | NAME IN FULL |             | AGE  |     | Sex | MARRIED<br>or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|-------------|------|-----|-----|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME  | Yrs. | Mo. |     |                         |                                                                                                                                       |                                                                                                             |                          |
| 1                 | W. H. H. H.  | W. H. H. H. | 17   |     |     |                         |                                                                                                                                       |                                                                                                             |                          |
| 2                 |              |             |      |     |     |                         |                                                                                                                                       |                                                                                                             |                          |
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| 9                 |              |             |      |     |     |                         |                                                                                                                                       |                                                                                                             |                          |
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| 29                |              |             |      |     |     |                         |                                                                                                                                       |                                                                                                             |                          |
| 30                |              |             |      |     |     |                         |                                                                                                                                       |                                                                                                             |                          |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number 4

S. S.

sailing from

, 19<sup>th</sup>

Arriving at Port of

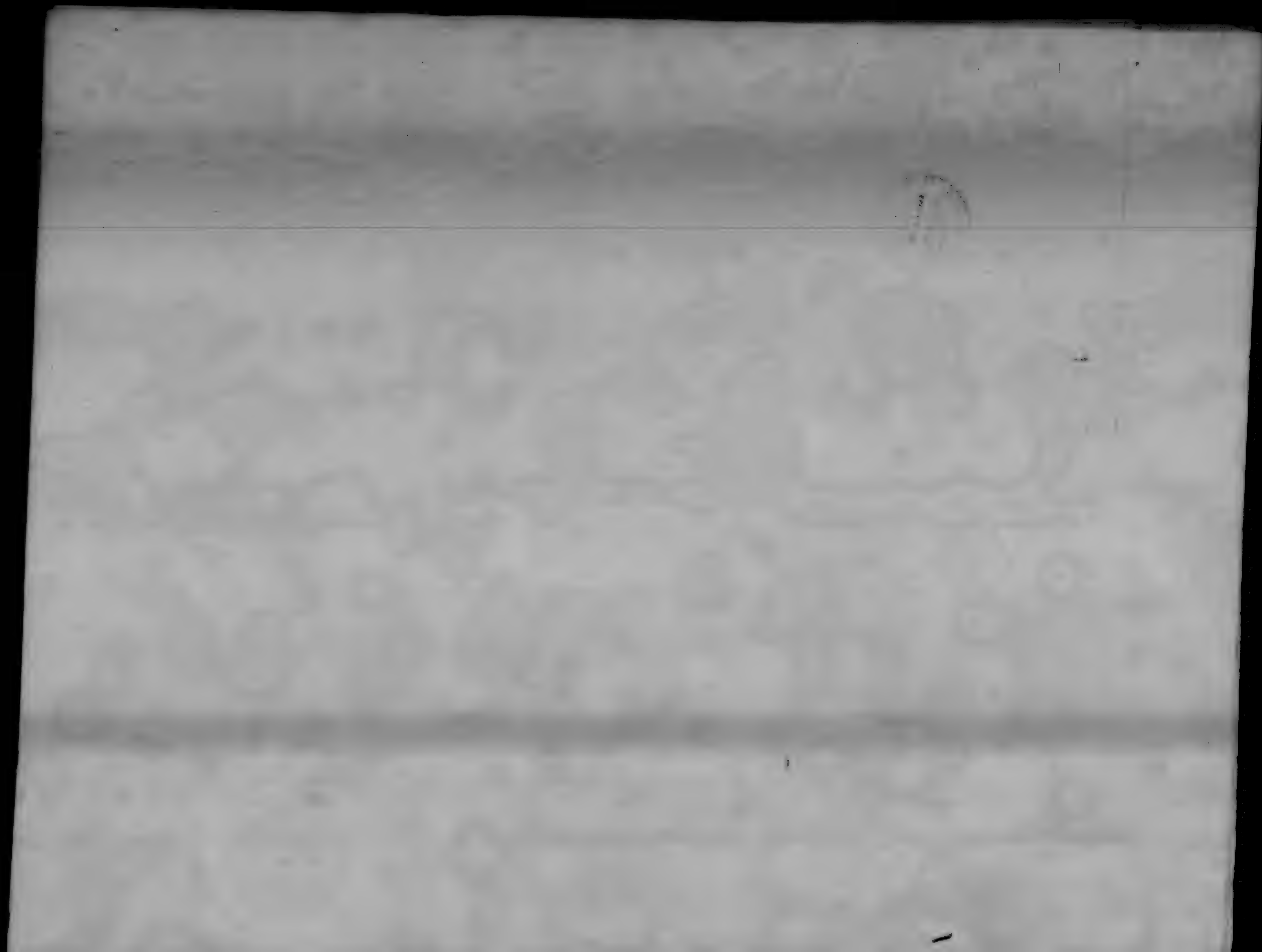
Philadelphia, Pa. - Sept. 11, 19<sup>th</sup>

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | MARRIAGE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|----------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |          |                                                                                                                                       |                                                                                                            |                          |
| 1                 |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
| 2                 |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 6                 |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 16                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
| 17                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 19                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 22                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
| 23                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 25                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
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| 29                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |
| 30                |              |            |     |     |          |                                                                                                                                       |                                                                                                            |                          |

*Lu V. Polch*

*J. M. H. ...*







## AFFIDAVIT OF SURGEON

I, Theodore Garcia de "Covado," D.O., Surgeon of the American ss. "SABARA", do hereby certify, solemnly, sincerely, and truly ~~that~~ that I have had \_\_\_\_\_ years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of Medical Examiners of Maryland, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, in number according to the best of my knowledge and belief, are full, correct, and true in all particulars relating to the mental and physical condition of such aliens.

Philadelphia, Pa. 11<sup>th</sup> Sept

Lu. B. & Co.

PG. 1. f. 1. v. 1. 10. 11.

LIST OF PAGES OF PAGES







Form 546

ALIEN CERTIFICATE—INSULAR TERRITORY (ORIGINAL)

1-MALE U. S. DEPARTMENT OF LABOR No. 60205  
IMMIGRATION SERVICE  
N. Y. I. C. (FR. 1 B. L. T. 1000) Port of SAN JUAN -  
Sept 2, 1932

This is to certify that the alien LUIS L. BURNETT  
native of VENEZUELA, citizen of REV. and of  
the S. S. race, has been lawfully admitted to the United States for permanent  
residence as shown by records of this office as follows:  
Admitted at S. S. JUNE 16, 1932, ex S. S. PERMANENT  
Status under Immigration Act of 1924 when admitted RES. OF PERMANENT  
Said alien is about to proceed to N. Y. via the seaport  
of S. S. and is entitled to admission at a seaport of continental United  
States upon identification and surrender of this certificate.  
Personal description of alien: Age, 42 YRS Height, 5' 10"; Color of hair, BLACK;  
Color of eyes, BROWN  
Identifying documents in alien's possession.

Signature of alien LUIS L. BURNETT  
T. Y. I. - ONE month  
VISIT  
Surrendered at PHILADELPHIA PA to Inspector Lee D. Dotch, Sept. 11, 1932

## OF ARRIVAL

officer of each vessel carrying such

September 18

whether going to join a relative or friend; and if so, what relative or friend, and his name and complete address

...ing children to school,  
14th St., N.W., —  
Washington, D. C.

dress as father & mother

College of Notre Dame,  
Mimora, Md.  
The College, Dubuque, Ia.  
Wood School, Evanston, Ill.

1-1000 (1-27-35)

ALIEN CERTIFICATE OF INSULAR TERRITORY

80218

U. S. DEPARTMENT OF LABOR

IMMIGRATION SERVICE

Port of

This is to certify that the alien  
name of Jose Rafael Bismar, citizen of Guatemala and of  
the Hispanic race, has been lawfully admitted to the United States for permanent  
residence as shown by records of this office as follows:  
Admitted at San Francisco, Cal. June 14, 1935, as Barbara  
Status under Immigration Act of 1924 was admitted Permanent Resident  
Said alien is going to proceed to Washington in the airport  
of San Francisco and is entitled to admission at a airport of continental United  
States upon identification and surrender of this certificate.  
Personal description of alien: Age, 18; Height, 4' 6"; Color of hair, Black.  
Color of eyes, Black.  
Identifying documents in alien's possession Passport.  
Signature of alien Jose Rafael Bismar  
Surrendered at PHILADELPHIA to Inspector Lee D. Hatch on Sept. 11, 1935

No Infer. No No No No No No No Good No 5 5 Drk. Blk. Bk. Bone

ALICE M. WHITE, INDIAN TERRITORY  
U. S. DEPARTMENT OF LABOR  
ORIGINAL  
No. 60715

This is to certify that the above named person of \_\_\_\_\_ race, has been lawfully admitted to the United States for permanent residence, the records of this office as follows:  
Admitted on \_\_\_\_\_ 19\_\_\_\_, at \_\_\_\_\_, of \_\_\_\_\_ State under Immigration Act of 1902 as an admitted \_\_\_\_\_ and is about to proceed to \_\_\_\_\_ via the seaport of \_\_\_\_\_ and is entitled to admission at a seaport of continental United States upon payment of dues and surrender of this certificate.  
Physical description of alien: Sex \_\_\_\_\_ Height \_\_\_\_\_ Color of hair, \_\_\_\_\_ Color of eyes, \_\_\_\_\_  
Following documents in alien's possession \_\_\_\_\_  
Signature of alien \_\_\_\_\_  
Signature of Inspector \_\_\_\_\_  
Special Agent in Charge \_\_\_\_\_

ALIEN CERTIFICATE OF NATURALIZATION  
 U. S. DEPARTMENT OF LABOR  
 IMMIGRATION SERVICE  
 Part of 524 J. IV - 103  
 This is to certify that the alien JOSEPH J. IV  
 native of Spain citizen of Spain and of  
 the U. S. race, has been lawfully admitted to the United States for permanent  
 residence in accordance with the records of this office as follows:  
 Admitted at San Francisco on March 1, 1903  
 Status under Immigration Act of 1911 when admitted Permanent  
 Said alien is about to proceed to San Francisco via the steamer  
San Francisco and is entitled to admission at a consular United  
 States upon identification and surrender of this certificate.  
 Personal description of alien: Sex, Male; Height, 5' 4"; Color of hair, Black;  
 Color of eyes, Blue.  
 Identifying documents in alien's possession None  
 Signature of alien Joseph J. IV  
 Subscribed and sworn to before me at San Francisco, Cal. this 1st day of April, 1903  
 In presence of James J. IV

ALUMINUM SULFATE IN ALABAMA TERRITORY  
U. S. DEPARTMENT OF COMMERCE

ORIGINAL  
60718

This is to certify that the above described [illegible] end of

[illegible] was lawfully admitted to the United States for permanent

*[Handwritten signature]*



STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

*Arriving at Port of Philadelphia, Pa.*

September 12

, 1933

List

The entries on this sheet must be typewritten or printed.

| 16          | 17                                                                                        | 18                | 19           | 20                                                | 21                        | 22                                                   | 23                                                                   | 24                                | 25     | 26                                                               | 27                                                               | 28                                                               | 29                                                               | 30                                                               | 31                                                               | 32                                                               | 33                                                               | 34                                       | 35                                                   | 36                 |          |      |                         |
|-------------|-------------------------------------------------------------------------------------------|-------------------|--------------|---------------------------------------------------|---------------------------|------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------|--------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------|------------------------------------------------------|--------------------|----------|------|-------------------------|
| No. on List | The name and complete address of nearest relative or friend in country whence alien came. | Final destination |              | Whether having a ticket to some final destination | By whom was passage paid? | Whether in possession of \$50, and if how, how much? | Whether ever before in the United States, and if so, when and where? | Former residence in United States |        |                                                                  |                                                                  |                                                                  |                                                                  |                                                                  |                                                                  |                                                                  |                                                                  | Condition of health, mental and physical | Determined or crossed? Name, family of name and date | Height Feet Inches | Color of |      | Marks of identification |
|             |                                                                                           | State             | City or town |                                                   |                           |                                                      | Yes                                                                  | If yes—Date of previous entry     | Where? | Whether alien who has been in United States for more than 1 year | Whether alien who has been in United States for less than 1 year | Whether alien who has been in United States for more than 1 year | Whether alien who has been in United States for less than 1 year | Whether alien who has been in United States for more than 1 year | Whether alien who has been in United States for less than 1 year | Whether alien who has been in United States for more than 1 year | Whether alien who has been in United States for less than 1 year |                                          |                                                      |                    | Hair     | Eyes |                         |
| 1           | Given Address: 12345 Main St., October 10, 1910, Baltimore, Md.                           | Md.               | Baltimore    | No                                                | Self                      | Yes                                                  | Yes                                                                  | 1910                              | 1910   | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 2           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 3           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 4           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 5           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 6           | Given Address: 12345 Main St., October 10, 1910, Baltimore, Md.                           | Md.               | Baltimore    | No                                                | Self                      | Yes                                                  | Yes                                                                  | 1910                              | 1910   | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 7           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |
| 8           | "                                                                                         | "                 | "            | "                                                 | "                         | "                                                    | "                                                                    | "                                 | "      | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | No                                                               | 5                                                                | 4                                        | Dark                                                 | Blue               | None     |      |                         |



**AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER**

I, John J. [illegible], of the Steamship [illegible], from San Francisco, Cal., do solemnly swear that I have caused the surgeon of said vessel to make a full and complete list of all persons on board of the vessel employed by the owners thereof, to make a physical and mental examination of each and all of the persons named in the said list, and from the report of said surgeon, and from my own investigation, I believe that none of said persons is of any of the classes excluded from admission to the United States by section 1552 of the Immigration Act, and that none of said persons is a person named in any of the lists or manifests in said lists or manifests concerning each of said persons named therein is correct and true in every particular.

Subscribed and sworn to at Philadelphia, Pa.

11<sup>th</sup>

September

1892

**INSTRUCTIONS FOR FILING ALIEN MANIFESTS**

Separate sheets should be prepared for each part of each passenger manifest.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession

Number 1

# LIST OF UNITED STATES CITIZENS FOR THE IMMIGRATION AUTHORITIES

Amer.  
S. S. *n/o. 0117111*

sailing from *LAS PIEDRAS, VENEZUELA* , *SEPTEMBER 4th, 1935* , Arriving at Port of *Philadelphia* , *September, 12th, 1935* , *192*

No.  
on  
List

NAME IN FULL

Family Name

Given Name

Y. M.

Age

Place of Birth

IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHERE ISSUED NATURALIZATION PAPERS AND DATE OF NATURALIZATION

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*Mc Lewis*

*Lloyd George*

*SI 6 M 8 11-7-03 Brooklyn, N.Y.*

*Passport # 222951*

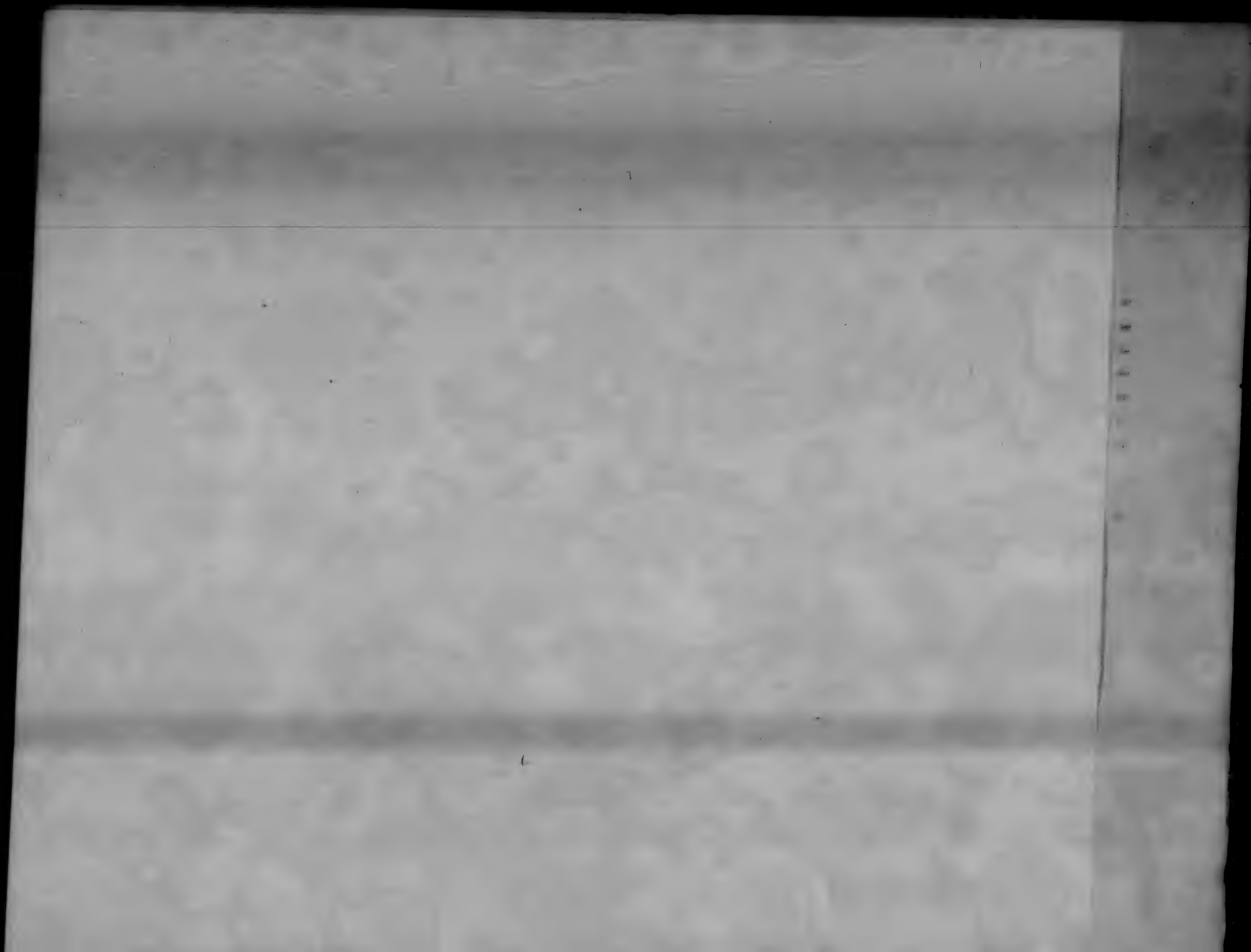
*New Washington, D.C.*

*1122-Grassmere Avenue, Far Rockaway, N.Y.*

*U. S. IMMIGRANT INSPECTOR*

*John F. Charlton---Master*











ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service, and to such questioning and inspection as may be required by the United States Customs Service, and to such questioning and inspection as may be required by the United States Customs Service, and to such questioning and inspection as may be required by the United States Customs Service.

S. S. "TERRIBLE"

*Passengers sailing from* PTO. HARRIS , GUATEMALA

, SEPT. 1935

| 1   | 2               | 3            | 4          | 5    | 6    | 7   | 8                 | 9                     | 10      | 11              | 12                                               | 13             | 14             | 15                                        |                                                            |           |                |                                              |                          |                                           |
|-----|-----------------|--------------|------------|------|------|-----|-------------------|-----------------------|---------|-----------------|--------------------------------------------------|----------------|----------------|-------------------------------------------|------------------------------------------------------------|-----------|----------------|----------------------------------------------|--------------------------|-------------------------------------------|
| No. | HEAD-TAX STATUS | NAME IN FULL |            | Age  |      | Sex | Married or single | Calling or occupation | Able to |                 | Nationality. Country of which citizen or subject | Race or people | Place of birth |                                           | Immigration Visa, Passport Visa, or Identity Permit number | Issued    |                | Data concerning verifications of facts, etc. | Last permanent residence |                                           |
|     |                 | Family name  | Given name | Yrs. | Mos. |     |                   |                       | Read    | Write           |                                                  |                | Country        | City or town, State, Province or District |                                                            | Place     | Date           |                                              | Country                  | City or town, State, Province or District |
| 1   |                 | RESNIKOFF    | JOSEPH     | 37   | 6    | M   | M                 | Merchant              | Yes     | English Spanish | Yes                                              | Gr. Britain    | English        | Canada                                    | Montreal                                                   | N. IV #13 | Guatemala City | 8/22/35                                      |                          | Guatemala City                            |
| 2   |                 | RESNIKOFF    | MARIA      | 39   | 8    | F   | M                 | Wife                  | "       | Spanish         | "                                                | Guatemala      | Span-Amer.     | Guatemala City                            | N. IV #14                                                  |           |                |                                              | Guatemala City           |                                           |
| 3   |                 | RESNIKOFF    | LIONEL     | 10   | 4    | M   | S                 | Student               | "       | do              | "                                                | do             | do             | do                                        | N. IV #11                                                  | do        | do             |                                              | do                       |                                           |
| 4   |                 | RESNIKOFF    | RONALD     | 9    | 1    | M   | S                 | do                    | "       | do              | "                                                | do             | do             | do                                        | N. IV #12                                                  | do        | do             |                                              | do                       |                                           |
| 5   |                 | RESNIKOFF    | NORMA      | 4    | 13   | F   | S                 | do                    | No      | Child           | No                                               | do             | do             | do                                        | N. IV #15                                                  | do        | do             |                                              | do                       |                                           |
| 6   |                 | URRUELA      | MARCEL     | 40   |      | M   | M                 | Publisher             | Yes     | English Spanish | Yes                                              | Guatemala      | do             | do                                        | WF1083626                                                  | do        | do             |                                              | do                       |                                           |
| 7   |                 | URRUELA      | MARIA      | 40   |      | F   | M                 | Wife                  | "       | Spanish         | "                                                | do             | do             | do                                        | WF1010970                                                  | do        | do             |                                              | do                       |                                           |
| 8   |                 | URRUELA      | CARLOS     | 11   | 11   | M   | S                 | Student               | "       | English         | "                                                | American       | U.S.A.         | Amplewood N.J.                            |                                                            | do        | do             | 7/31/35                                      | U.S.A., Tenafly, N.J.    |                                           |
| 9   |                 | URRUELA      | RODOLFO    | 8    | 3    | M   | S                 | do                    | "       | do              | "                                                | do             | do             | do                                        |                                                            | do        | do             |                                              | do                       |                                           |
| 10  |                 | SINERA       | AMELIA     | 16   | 11   | F   | S                 | do                    | "       | do              | "                                                | Guatemala      | Span-Amer      | Guatemala City                            | WF1043015                                                  | do        | do             | 6/10/35                                      | do                       |                                           |
| 11  |                 |              |            |      |      |     |                   |                       |         |                 |                                                  |                |                |                                           |                                                            |           |                |                                              |                          |                                           |



# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

List I-A

The entries on this sheet must be typewritten or printed.

Arriving at Port of PHILADELPHIA, PA.

SEPTEMBER 15th 1935

| No. on List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination | By whom was passage paid? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend, state name and complete address, and if relative, exact relationship. | Previous record in United States | Whether a political subject | Whether an anarchist | Condition of health, mental and physical | Informed or engaged | Flight    | Class of  | Mark of identification |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------|----------------------|------------------------------------------|---------------------|-----------|-----------|------------------------|
|             |                                                                                                                                                            | Foreign country   | By I. S. A. or other      | Yes or No                                                            | Yes or No                                                                                                         | Yes or No                        | Yes or No                   | Yes or No            | Yes or No                                | Yes or No           | Yes or No | Yes or No | Yes or No              |
| 1           | Mother in Law<br>Mo:-Mrs Dolores deAguilar<br>Guatemala City, Guatemala                                                                                    | N.Y. N.Y.         | Yes Self                  | Yes 1929                                                             | 10/29 No:-Mrs Mary Resnikoff<br>2198 Eruger Av., Bronx, NY                                                        | No                               | No                          | No                   | No                                       | No                  | 5 10      | Fr Br     | None                   |
| 2           | Mo:-Mrs Dolores deAguilar<br>Guatemala City, Guatemala                                                                                                     | do do             | Husband                   | do do                                                                | Mo-in-law:-<br>AS ABOVE                                                                                           | No                               | No                          | No                   | No                                       | No                  | 4 10      | Fr Brk    | None                   |
| 3           | Grandmother:<br>AS ABOVE                                                                                                                                   | do do             | Father                    | No do                                                                | Grandmother:-<br>AS ABOVE                                                                                         | No                               | No                          | No                   | No                                       | No                  | 3 9       | Fr Br     | None                   |
| 4           | DO DO                                                                                                                                                      | do do             | do                        | No do                                                                | AS ABOVE                                                                                                          | No                               | No                          | No                   | No                                       | No                  | 3         | Fr Br     | None                   |
| 5           | DO DO                                                                                                                                                      | do do             | do                        | No No                                                                | AS ABOVE                                                                                                          | No                               | No                          | No                   | No                                       | No                  | 3 10      | Fr Br     | None                   |
| 6           | Father in Law:-E. Marraquin<br>Guatemala City, Guatemala                                                                                                   | N.J. do           | Self                      | Yes 1932                                                             | 6/22 HATHING ROAD ST<br>47 Lindley Av., Jersey                                                                    | No                               | No                          | No                   | No                                       | No                  | 5 5       | Fr Br     | None                   |
| 7           | Father:-E. Marraquin<br>Guatemala City, Guatemala                                                                                                          | do do             | Husband                   | Yes 1932                                                             | 6/22 do do                                                                                                        | No                               | No                          | No                   | No                                       | No                  | 5 5       | Fr Br     | None                   |
| 8           |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 9           |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 10          | AMT:-Mrs Carmen A. Storie<br>Guatemala City, Guatemala                                                                                                     | N.J. do           | do                        | Yes 1932                                                             | 6/12 do do                                                                                                        | No                               | No                          | No                   | No                                       | No                  | 5 5       | Fr Br     | None                   |
| 11          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 12          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 13          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 14          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 15          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 16          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 17          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 18          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 19          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 20          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 21          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 22          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 23          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 24          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 25          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 26          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 27          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 28          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 29          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 30          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 31          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 32          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 33          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 34          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 35          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 36          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |
| 37          |                                                                                                                                                            |                   |                           |                                                                      |                                                                                                                   |                                  |                             |                      |                                          |                     |           |           |                        |

2-1-10  
1-12-35  
11/10/35

11/10/35



# AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, **NILS SAGEN**, **MASTER**, of the S.S. "**TURMALBA**", from **NEW YORK**, do solemnly, sincerely, and truly declare that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, **ONE** in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

*N. Sagen*  
MASTER

Subscribed before me this \_\_\_\_\_ day of **SEPTEMBER**, 19 **35**  
at **PHILADELPHIA, PENN.**

Immigration Officer

## INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

1. The manifest shall be prepared for each port at which the vessel arrives in the United States, including an intermediate port, and shall be in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office.

2. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office.

3. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office.

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9. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office.

10. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office. The manifest shall be prepared in duplicate, one copy to be retained on board the vessel and the other copy to be forwarded to the nearest immigration office.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number

I

S.S. "TURRIALBA"

sailing from PTO. BARRIOS-GUATEMALA, SEPT. 8th, 1935, Arriving at Port of PHILADELPHIA, Pa. Sept. 15th, 1935

| No.<br>or<br>List                                                | NAME IN FULL |            | AGE   | SEX | IF NATIVE OF UNITED STATES INSULAR POSSESSION, OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES              |
|------------------------------------------------------------------|--------------|------------|-------|-----|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------|
|                                                                  | FAMILY NAME  | GIVEN NAME |       |     |                                                                                                                                         |                                                                                                             |                                       |
| PASSENGERS EMBARKED AT HOBOKEN, N. J., AUGUST 31st 1935 (CRUISE) |              |            |       |     |                                                                                                                                         |                                                                                                             |                                       |
| 2                                                                | HORNITZ      | ORVILLE    | 25 10 | M   | M Nov. 20th 1909                                                                                                                        | Strafford, Penna.                                                                                           | 533 N. Wolfe St., Baltimore, Md.      |
| 3                                                                | HORNITZ      | NATALINE   | 20 10 | F   | M Nov. 22nd 1914                                                                                                                        | Philadelphia, Penna.                                                                                        | 533 N. Wolfe St., Baltimore, Md.      |
| 3                                                                | MARAHN       | HELEN      | 25 11 | F   | S Oct. 10th 1911                                                                                                                        | Philadelphia, Penna.                                                                                        | 1812 67th Ave., Philadelphia, Pa.     |
| 4                                                                | NEWHALL      | CAMPBELL   | 34 11 | M   | S Oct. 19th 1900                                                                                                                        | Baltimore, Md.                                                                                              | Itan, Penna.                          |
| 5                                                                | SCHACHTEL    | FALTER     | 27    | M   | M Jan. 21st 1908                                                                                                                        | Cleveland, Ohio                                                                                             | 236 W. Walnut Lane, Philadelphia, Pa. |
| 6                                                                | SCHACHTEL    | SUE-CLAUDE | 25    | F   | M Mar. 9th 1910                                                                                                                         | Philadelphia, Penna.                                                                                        | 236 W. Walnut Lane, Philadelphia, Pa. |
| PASSENGERS EMBARKED AT PTO. BARRIOS-GUATEMALA, SEPT. 8th 1935    |              |            |       |     |                                                                                                                                         |                                                                                                             |                                       |
| 7                                                                | COUTURE      | EDWARD     | 27    | M   | S Feb. 26th 1908                                                                                                                        | Lowell, Mass.                                                                                               | 239 Vermont St., Lowell, Mass.        |
| 8                                                                | LOCKWOOD     | JOHN       | 31 5  | M   | M April 9th 1904                                                                                                                        | New York, N. Y.                                                                                             | 343 E. 60th St., New York, N.Y.       |
| 9                                                                | LOCKWOOD     | HENRIETTA  | 29 4  | F   | M May 18th 1906                                                                                                                         | New York, N. Y.                                                                                             | 343 E. 60th St., New York, N.Y.       |
| 10                                                               | MALENGHINI   | HELEN      | 44 11 | F   | M Sept. 21st 1890                                                                                                                       | Chambersburg, Penna.                                                                                        | 246 Hamilton Av., Hylis, Pa.          |
| 11                                                               | MALENGHINI   | PAUL, JR.  | 14    | M   | S April 2nd 1921                                                                                                                        | Buffalo, N.Y.                                                                                               | 246 Hamilton Av., Hylis, Pa.          |
| 12                                                               | MICHAAN      | ERADORA    | 23    | M   | S June 4th 1912                                                                                                                         | Tampa, Fla.                                                                                                 | 1101 85th St., Brooklyn, N.Y.         |
| 13                                                               | REWIN        | REWIN      | 23 2  | M   | S Nov. 20th 1911                                                                                                                        | New York, N. Y.                                                                                             | 300 Tower Bldg., Washington, D.C.     |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number ONE

# LIST OF UNITED STATES CITIZENS

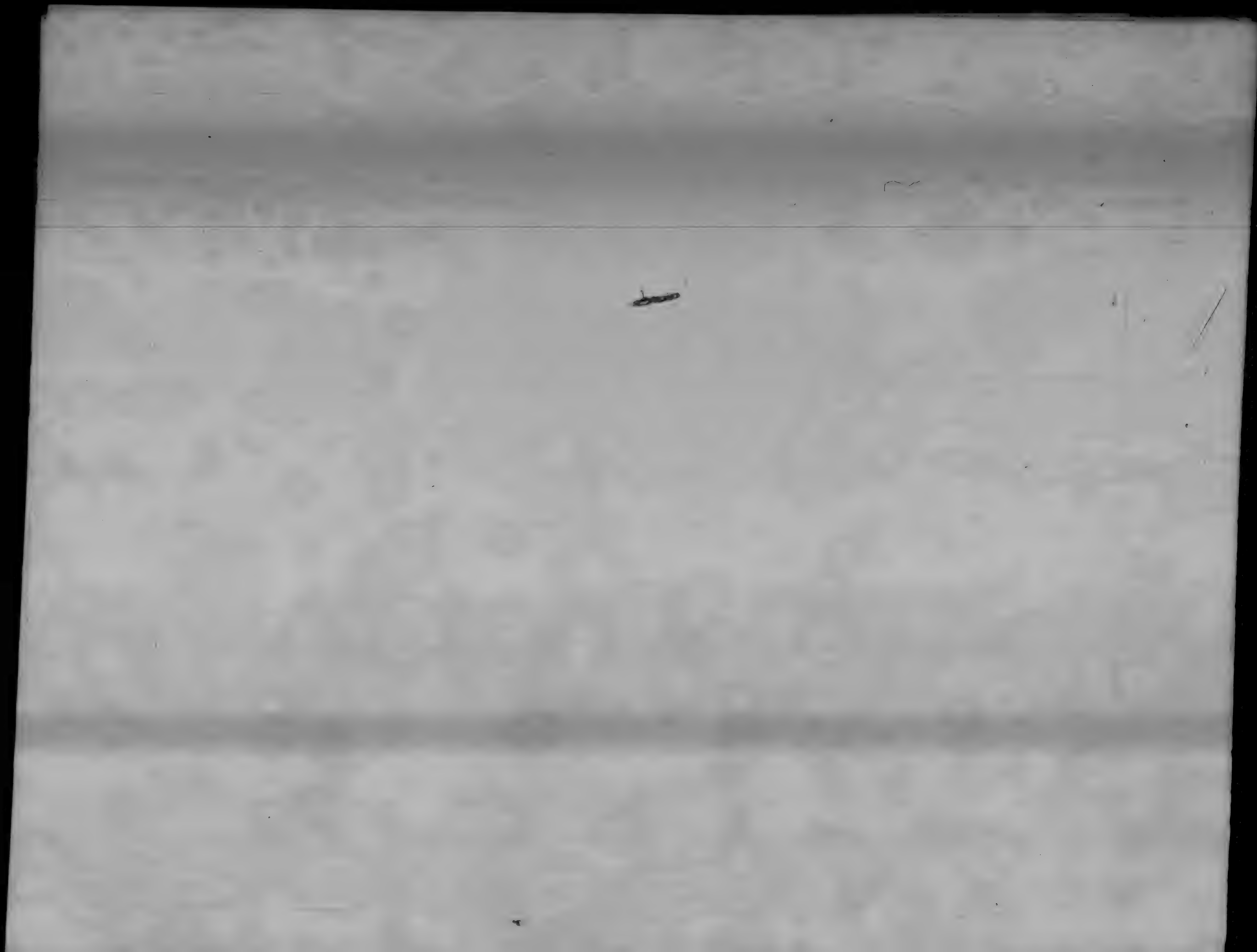
(FOR THE IMMIGRATION AUTHORITIES)

M  
S. "SVANENOLM"

Sailing from GOTHENBURG, SWEDEN 15 / 1935, Arriving at Port of CAMDEN, 1935

| No.<br>on<br>List | NAME IN FULL |              | AGE |     | SEX | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE. | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES       |
|-------------------|--------------|--------------|-----|-----|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|--------------------------------|
|                   | FAMILY NAME  | GIVEN NAME   | Yrs | Mos |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 1                 | KNAUTH       | OLIVER       | 23  | 2   | M   | 8                    | NEW YORK CITY, N.Y. 6.6. 1912                                                                                                            |                                                                                                               |                                |
| 2                 | BARTLEY      | FRANK, LEWIS | 21  | NO  | M   | 8                    | MARIETTA, OHIO 8.25. 1914                                                                                                                |                                                                                                               | 27 WEST 67 STREET, NEW YORK C. |
| 3                 | BARTLEY      | JOHN PHILLP  | 18  | 10  | M   | 8                    | TULSA, OKLA. 11.7. 1916                                                                                                                  |                                                                                                               | 471 PARK AVE. NEW YORK C.      |
| 4                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               | BITTO                          |
| 5                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 6                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 7                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 8                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 9                 |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
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| 13                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 14                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 15                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 16                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 17                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 18                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 19                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
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| 27                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
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| 30                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 31                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 32                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 33                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 34                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 35                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 36                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 37                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 38                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 39                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
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| 41                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 42                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 43                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 44                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 45                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 46                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 47                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 48                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 49                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |
| 50                |              |              |     |     |     |                      |                                                                                                                                          |                                                                                                               |                                |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States; and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "TANAMOR"

Sailing from ALVARO OBREGON, MEXICO, September 10th, 1935, Arriving at Port of Philadelphia, September 16th., 1935.

| No.<br>List | NAME        |            | AGE    | SEX | DATE OF BIRTH | PLACE OF BIRTH                    | NATURALIZATION | RESIDENCE                           |
|-------------|-------------|------------|--------|-----|---------------|-----------------------------------|----------------|-------------------------------------|
|             | FAMILY NAME | GIVEN NAME |        |     |               |                                   |                |                                     |
| 1           | Hazard      | Harry W.   | 44 5/8 | M   | 7             | March 28, 1891. Philadelphia, Pa. | --             | 83. Montague Place. Montclair, N.J. |







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

Number

Amer. 3-

S. S.

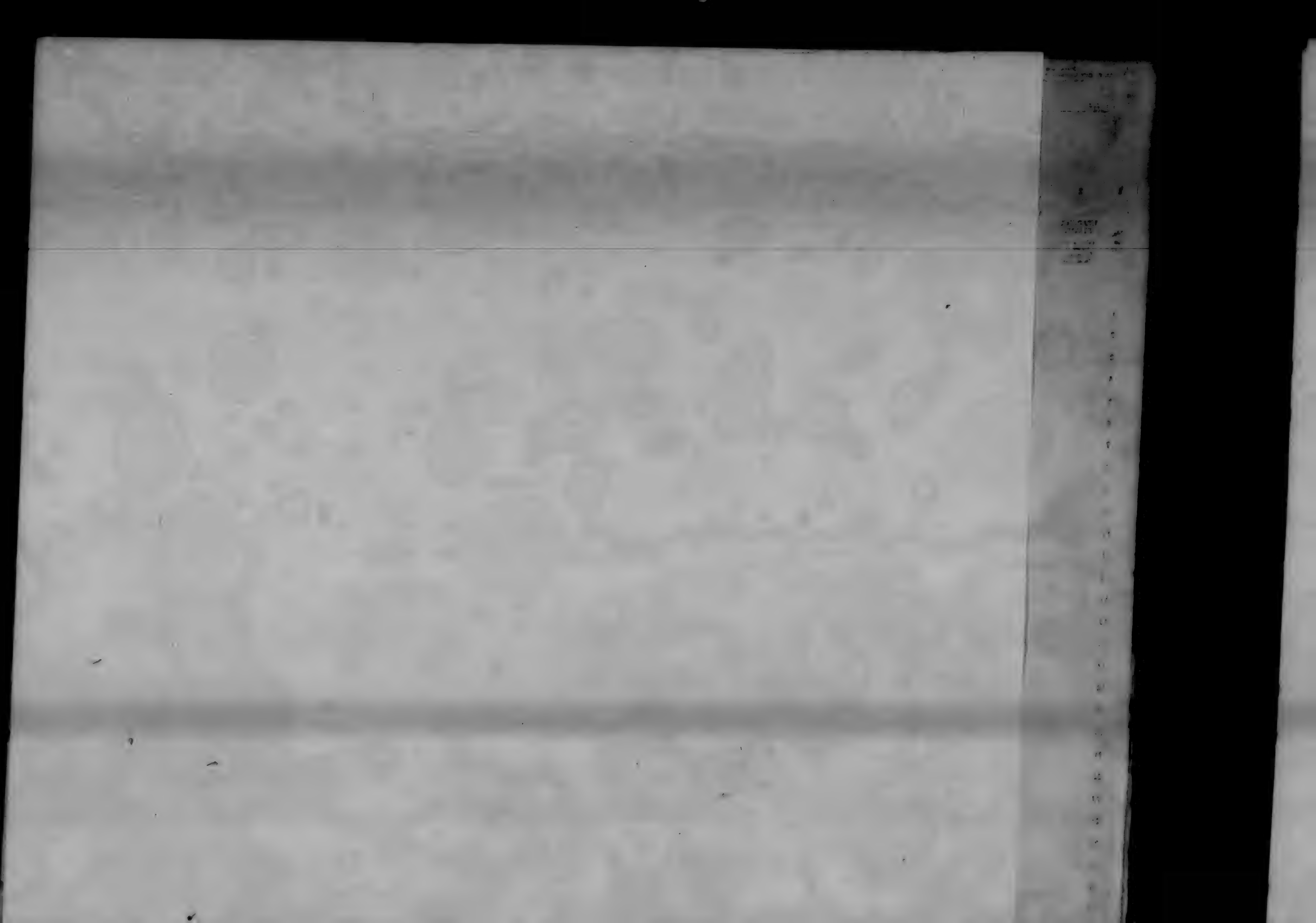
sailing from

, 19 , Arriving at Port of

19

| No.<br>on<br>List | NAME IN FULL |            | AGE | SEX | MARRIED OR<br>SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 1                 |              |            |     |     |                      | U.S. Passport # 179870 - issued at Washington D.C. 4/12/25                                                                            |                                                                                                            |                          |
| 2                 |              |            |     |     |                      | U.S. Passport # 224997 - issued at Washington D.C.                                                                                    |                                                                                                            |                          |
| 3                 |              |            |     |     |                      | Lee B. Dolch -                                                                                                                        |                                                                                                            |                          |
| 4                 |              |            |     |     |                      | U. S. IMMIGRANT INSPECTION                                                                                                            |                                                                                                            |                          |
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| 74                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
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| 79                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 80                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
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| 96                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 97                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 98                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 99                |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |
| 100               |              |            |     |     |                      |                                                                                                                                       |                                                                                                            |                          |







## AFFIDAVIT OF SURGEON

I, \_\_\_\_\_, Surgeon of the \_\_\_\_\_, do  
solemnly, sincerely, and truly \_\_\_\_\_ that I have had \_\_\_\_\_  
(Make whether Surgeon "acting therewith" or "employed by  
within thereof" as the case may be)  
years' experience as a Physician  
and Surgeon, and that I am entitled to practice as such by and under the authority of \_\_\_\_\_  
\_\_\_\_\_, and that I have made a personal examination of  
each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, \_\_\_\_\_ in number, according  
to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical  
condition of such aliens.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

at

*"When...the person...is established as the author of such evidence shall be deemed to have an authoritative opinion at point of arrival," and any changes that may have occurred by date of departure from the country shall be noted between two vertical columns.*

## LIST OF RACES OR PEOPLES

There is a gap<sup>2</sup> in the U.S. literature by the work done which shows opening and maintaining the market. The research indicates that the full force of the economy, the quality issues in the past only to focus on decreasing the demand for the

|             |              |                          |
|-------------|--------------|--------------------------|
| Armenian    | Հայերէն      | Armenian                 |
| Azerbaijani | Азәрбајҹанча | Azerbaijani              |
| Belarusian  | Беларуская   | Belarusian (Belarussian) |
| Bosnian     | Босански     | Bosnian                  |
| Bulgarian   | Български    | Bulgarian                |
| Catalan     | Каталонски   | Catalan                  |
| Cebuano     | Сebuano      | Cebuano                  |
| Chinese     | Кинески      | Chinese                  |
| Croatian    | Хрватски     | Croatian                 |
| Dutch       | Долски       | Dutch                    |
| English     | Англиски     | English                  |
| Finnish     | Фински       | Finnish                  |
| French      | Француски    | French                   |
| German      | Германски    | German                   |
| Greek       | Грчки        | Greek                    |
| Hebrew      | Иврит        | Hebrew                   |
| Hindi       | Хинди        | Hindi                    |
| Indonesian  | Индонезиски  | Indonesian               |
| Italian     | Италијански  | Italian                  |
| Japanese    | Јапонски     | Japanese                 |
| Korean      | Корейски     | Korean                   |
| Latvian     | Латвиски     | Latvian                  |
| Lithuanian  | Литвански    | Lithuanian               |
| Malay       | Малајски     | Malay                    |
| Maltese     | Малтешки     | Maltese                  |
| Norwegian   | Норвешки     | Norwegian                |
| Polish      | Полски       | Polish                   |
| Portuguese  | Португалски  | Portuguese               |
| Romanian    | Романски     | Romanian                 |
| Russian     | Руски        | Russian                  |
| Slovak      | Словачки     | Slovak                   |
| Slovenian   | Словенски    | Slovenian                |
| Spanish     | Шпански      | Spanish                  |
| Swedish     | Шведски      | Swedish                  |
| Tamil       | Тамилски     | Tamil                    |
| Telugu      | Телугу       | Telugu                   |
| Thai        | Тајски       | Thai                     |
| Ukrainian   | Украински    | Ukrainian                |
| Urdu        | Урду         | Urdu                     |
| Vietnamese  | Виетнамски   | Vietnamese               |
| Welsh       | Велшки       | Welsh                    |
| Yiddish     | Јидиш        | Yiddish                  |



List

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States. This (pink) sheet is for the listing of

3512

Arr. info  
S.S.

"TORONTO".

Passengers sailing from

OSLO, NORWAY

AUGUST 29th

, 1936.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

| No. on List | HEAD-TAX STATUS<br>(This column for use of Government officials only) | NAME IN FULL |            | Age<br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to                                                    |      | Nationality<br>(Country of which citizen or subject) | Race or people | Place of birth |              | Immigration Visa Number | Issued at | Date | Last permanent residence |              |
|-------------|-----------------------------------------------------------------------|--------------|------------|------------------|-----|-------------------|-----------------------|------------------------------------------------------------|------|------------------------------------------------------|----------------|----------------|--------------|-------------------------|-----------|------|--------------------------|--------------|
|             |                                                                       | Family name  | Given name |                  |     |                   |                       | Read and write (or if interpreter present, on what ground) | Will |                                                      |                | Country        | City or town |                         |           |      | Country                  | City or town |

|   |      |      |      |    |   |   |              |     |           |     |        |      |        |      |         |        |      |
|---|------|------|------|----|---|---|--------------|-----|-----------|-----|--------|------|--------|------|---------|--------|------|
| 1 | PAID | ROTH | JOHN | 40 | M | S | MANUFACTURER | YES | NORWEGIAN | YES | NORWAY | OSLO | NORWAY | OSLO | 29/8-36 | NORWAY | OSLO |
| 2 | PAID | ROTH | JOHN | 18 | M | S | BOY          | "   | "         | "   | "      | OSLO | NORWAY | "    | "       | "      | "    |
| 3 | PAID | ROTH | JOHN | 19 | M | S | BOY          | "   | "         | "   | "      | OSLO | NORWAY | "    | "       | "      | "    |

Admitted at Philadelphia on August 30, 1936  
for 12 days with expiration date for  
entry for 12 days at Philadelphia  
They were transferred from the Boston manifest  
which states that they were admitted on August 29, 1936  
at Boston, and they were admitted at Philadelphia on August 30, 1936  
and given 12 days leave of absence.

U. S. IMMIGRANT INSPECTOR

Head Office  
1000 10th St  
1000 10th St



States, or a port of another insular pos  
**FIRST-CABIN PASSENGERS ONLY**

Arriving at Port of PHILADELPHIA

, 19

The entries on this sheet must be typewritten or printed.

92



EM Jensen,  
Master Engineer.

*Immigration Officer.*

2

[illegible]

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[illegible]







List \_\_\_\_\_

# LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED

ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States.  
This (pink) sheet is for the listing of

3527

Ba.

S. S. GYPSUM-EMPRESS

Passengers sailing from WINDSOR, NOVA SCOTIA

SEPT 17, 1935

| 1           | 2                                                                      | 3                                      | 4                | 5   | 6                 | 7                     | 8                                                | 9                                                | 10             | 11                                                                  | 12                                                                                                                   | 13                   | 14                                                                                                     | 15                                                                            |
|-------------|------------------------------------------------------------------------|----------------------------------------|------------------|-----|-------------------|-----------------------|--------------------------------------------------|--------------------------------------------------|----------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| No. on List | HEAD-TAX STATUS<br>This column is for use of Government officials only | NAME IN FULL<br>Family name Given name | Age<br>Yrs. Mos. | Sex | Married or single | Calling or occupation | Able to read and write English or other language | Nationality, Country of which citizen or subject | Race or people | Place of birth<br>Country City or town, State, Province or District | Immigration Visa, Passport Visa, or Reciprocity Permit number<br>This column is for use of Government officials only | Issued<br>Place Date | Data concerning verifications of landings, etc.<br>This column is for use of Government officials only | Last permanent residence<br>Country City or town, State, Province or District |
| 1           | GoDOLFE                                                                | ABEL EDWORTH                           | 30               | F   | Single            | English               | English                                          | CANADA                                           | English        | CANADA                                                              | 4th FAK                                                                                                              | SEPT 14              |                                                                                                        | USA                                                                           |
| 2           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 3           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 4           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 5           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 6           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 7           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 8           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 9           |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 10          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 11          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 12          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 13          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 14          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 15          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 16          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 17          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 18          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 19          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 20          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 21          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 22          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 23          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 24          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 25          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 26          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 27          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |
| 28          |                                                                        |                                        |                  |     |                   |                       |                                                  |                                                  |                |                                                                     |                                                                                                                      |                      |                                                                                                        |                                                                               |

Admitted - as resident - previously admitted at Philadelphia, Pa. Sept 22, 1934 -  
See B. 2. 5. h -  
U. S. IMMIGRANT INSPECTOR



STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a part of another insular possession, in whatever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

List / .....

The entries on this sheet must be typewritten or printed.

## Arriving at Port of

PHILADELPHIA PA.

SEPT 21st, 1935

| No.<br>on<br>List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination<br><small>(Indicate future permanent residence)</small> | By whom was passage paid? | Whether ever before in the United States, and if so, when and where?<br><small>(Last entrance only)</small> | Purpose of coming to United States | Whether going to join a relative or friend, state name and complete address, and if relative, exact relationship | Condition of health, mental and physical | Deformed or crippled? Nature, length of time, and cause | Height<br>Feet<br>Inches | Color of Hair Eyes | Marks of identification       |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------|--------------------|-------------------------------|
| 1                 | DR HARRY W CRANE<br>(HUSBAND) 1213 Pinyan ave<br>DURHAM NC<br>USA                                                                                          | N.C. DURHAM YES SELF                                                      | YES YES IF COMED BY       | DR HARRY W CRANE<br>(HUSBAND)<br>DURHAM NC<br>USA                                                           | NO                                 | NO                                                                                                               | GOOD                                     | Nil                                                     | 5                        | Hazel              | IDENTIFICATION ON RIGHT THUMB |



AFFIDAVIT OF THE MASTER OR COMMANDING OFFICER, OR FIRST OR SECOND OFFICER

I, Thos. O'Shea Master, of the S/S. Gypsum Express Windsor N. S., do solemnly, sincerely, and truly swear that I have caused the surgeon of said vessel sailing therewith, or the surgeon employed by the owners thereof, to make a physical and mental examination of each and all of the aliens named in the foregoing Lists or Manifest Sheets, in number, and that from the report of said surgeon and from my own investigation, I believe that no one of said aliens is of any of the classes excluded from admission into the United States by laws regulating immigration, and that also, according to the best of my knowledge and belief, the information in said Lists or Manifests concerning each of said aliens named therein is correct and true in every respect.

Sworn to before me this  
at Philadelphia, Pa.

21<sup>st</sup> day of September, 1935.

Thos. O'Shea  
Master

Lee V. Hall  
Notary Public

INSTRUCTIONS FOR PREPARING ALIEN MANIFESTS

The following instructions are to be followed in the preparation of alien manifests. They are intended to guide the master or commanding officer, or first or second officer, in the preparation of the manifest, and to insure that the information furnished is complete and correct. The instructions are divided into two parts, the first part dealing with the general requirements for the manifest, and the second part dealing with the specific requirements for the different classes of aliens.

1. The manifest shall be prepared in duplicate, one copy to be retained by the master or commanding officer, and the other copy to be furnished to the immigration authorities at the port of arrival.

2. The manifest shall be prepared in English, and shall be signed by the master or commanding officer, or first or second officer, in the presence of the immigration authorities.

3. The manifest shall contain the following information for each alien: Name, age, sex, date of birth, place of birth, date of arrival, and date of departure.

4. The manifest shall also contain the following information for each alien: The name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

5. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

6. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

7. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

8. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

9. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.

10. The manifest shall be prepared in accordance with the following instructions: The name of the alien shall be written in full, and shall be followed by the name of the vessel, the name of the master or commanding officer, the name of the first or second officer, the name of the surgeon, and the name of the physician.



Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. STEAMER DEPT

sailing from San Francisco, Cal.

, 19 35, Arriving at Port of San Francisco, Cal. Sept 21st, 1935

| No.<br>or<br>List | NAME IN FULL |            | AGE | SEX | MARRIED | IF NATIVE OF UNITED STATES INSULAR POSSESSIONS OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|------------|-----|-----|---------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME |     |     |         |                                                                                                                                        |                                                                                                              |                          |

|   |       |     |    |  |  |                  |               |  |
|---|-------|-----|----|--|--|------------------|---------------|--|
| 1 | TRADE | ALY | 49 |  |  | BIG RAPIDS, MICH | DEC 21st 1885 |  |
|---|-------|-----|----|--|--|------------------|---------------|--|

*Lee B. Doleh*  
U. S. IMMIGRATION INSPECTOR





1898  
S. S.

No.  
of  
List.

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

LIST OF UNITED STATES CITIZENS  
(FOR THE IMMIGRATION AUTHORITIES)

S. S. "HOLLY HILL"

Sailing from *La Plata, Argentina, 2-27-1921*, Arriving at Port of *Philadelphia*, *Sept 3, 1921*

| No.<br>on<br>List | NAME IN FULL |                       | AGE  |      | SEX | MARRIED<br>or<br>Single | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES |
|-------------------|--------------|-----------------------|------|------|-----|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
|                   | FAMILY NAME  | GIVEN NAME            | Yrs. | Mos. |     |                         |                                                                                                                                         |                                                                                                             |                          |
| 1                 | WILLIAMS     | JULIUS WILLIAMS       | 17   | -    | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 2                 |              | Elizabeth E. Williams |      |      | F   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 3                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 4                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 5                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 6                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 7                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 8                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 9                 |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 10                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 11                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 12                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 13                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 14                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 15                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 16                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 17                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 18                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 19                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 20                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 21                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 22                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 23                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 24                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 25                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 26                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 27                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 28                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 29                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 30                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 31                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 32                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 33                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 34                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 35                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 36                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 37                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 38                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 39                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 40                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 41                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 42                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 43                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 44                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 45                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 46                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 47                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 48                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 49                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 50                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 51                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 52                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 53                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 54                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 55                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 56                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 57                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 58                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 59                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 60                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 61                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 62                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 63                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 64                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 65                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 66                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 67                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 68                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 69                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 70                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 71                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 72                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 73                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 74                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 75                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 76                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 77                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 78                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 79                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 80                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 81                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 82                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 83                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 84                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 85                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 86                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 87                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 88                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 89                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 90                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 91                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 92                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 93                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 94                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 95                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 96                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 97                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 98                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 99                |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |
| 100               |              | William J. Williams   |      |      | M   |                         | born 12-10-1903, WASH. D.C.                                                                                                             |                                                                                                             |                          |







## AFFIDAVIT OF SURGEON

I, JOSEPH GRABENSTEIN, Surgeon of the S.S. "ATENAS" SAILING THEREWITH, do solemnly, sincerely, and truly SWEAR that I have had THIRTY-TWO years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of THE STATE OF NEW YORK, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, ONE in number according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Joseph H. Bernstein

*Sworn to before me this* \_\_\_\_\_ *day of* \_\_\_\_\_, 19

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ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to examination by the United States Customs Service at the port of arrival. This (pink) sheet is for the listing of

S. S.      ' A T E N A S '

*Passengers sailing from* PUERTO BARRIOS, GUATEMALA

SEPTEMBER 16th, . 1935.

[illegible]



List A-1.

The entries on this sheet must be typewritten or printed.

# STATES IMMIGRATION OFFICER AT PORT OF ARRIVAL

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer  
FIRST-CABIN PASSENGERS ONLY

Arriving at Port of PHILADELPHIA, PA. (VIA CHARLESTON, S.C.), SEPTEMBER 22nd, 1935.

| 16                | 17                                                                                                                                                         | 18                                          | 19                                                 | 20                        | 21                                                        | 22                                                                   | 23                                                                                                               | 24                                 | 25                   | 26                   | 27                                            | 28                                           | 29                                           | 30                                | 31                                           | 32                                           | 33                                       | 34                                                      | 35                      | 36         | 37                         |               |                            |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------|---------------------------|-----------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------|----------------------|-----------------------------------------------|----------------------------------------------|----------------------------------------------|-----------------------------------|----------------------------------------------|----------------------------------------------|------------------------------------------|---------------------------------------------------------|-------------------------|------------|----------------------------|---------------|----------------------------|
| No.<br>on<br>List | The name and complete address of nearest relative or friend in country whence alien came, or if none there, then in country of which a citizen or subject. | Final destination                           | Whether having a ticket for such final destination | By whom was passage paid? | Whether in possession of U.S. visa, and if yes, how much? | Whether ever before in the United States, and if so, when and where? | Whether going to join a relative or friend: state name and complete address, and if relative, exact relationship | Purpose of coming to United States | Whether a polygamist | Whether an anarchist | Whether a member of a subversive organization | Whether a member of a communist organization | Whether a member of a socialist organization | Whether a member of a labor union | Whether a member of a fraternal organization | Whether a member of a religious organization | Condition of health, mental and physical | Deformed or crippled, Nature, length of time, and cause | Height                  | Complexion | Color of Hair              | Color of Eyes | Markings of identification |
|                   |                                                                                                                                                            | In U. S. A., its territories or possessions |                                                    |                           |                                                           |                                                                      |                                                                                                                  |                                    |                      |                      |                                               |                                              |                                              |                                   |                                              |                                              | State / City or town                     | Yes / No                                                | When or period of years | Where      | What kind of disease, name | Yes / No      | Yes / No                   |

|   |                                                                  |  |    |      |     |          |                                                                                             |   |     |    |    |    |    |    |    |    |      |    |     |     |      |      |      |
|---|------------------------------------------------------------------|--|----|------|-----|----------|---------------------------------------------------------------------------------------------|---|-----|----|----|----|----|----|----|----|------|----|-----|-----|------|------|------|
| 1 | Husband: Jose, Reforma Ave. & Lima St., Guatemala City Guatemala |  | No | Self | Yes | Yes 1922 | McKeesport, Pa: William Harrison, 1899/ port, Feb. 518-31st Ave., McKeesport, Penna. 2, 34. | 6 | Yes | No | No | No | No | No | No | No | Good | No | 5 2 | Pr. | Brs. | Gray | None |
|---|------------------------------------------------------------------|--|----|------|-----|----------|---------------------------------------------------------------------------------------------|---|-----|----|----|----|----|----|----|----|------|----|-----|-----|------|------|------|

Jose & William Harrison  
McKeesport, Pa.  
1899/ port, Feb. 518-31st Ave.,  
McKeesport, Penna. 2, 34.



U S DEPARTMENT OF JUSTICE

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

Number

1

S.S. "ATENAS" sailing from PTO. BARRIOS, GUATEMALA, SEPTEMBER 16th, 1935, Arriving at Port of PHILADELPHIA, PA. - VIA CHARLESTON, S.C. - SEPTEMBER 22nd, 1935.

## PASSENGERS EMBARKED AT PHILADELPHIA, PA. - SEPTEMBER 9th, 1935.

| No. | NAME IN FULL       | AGE | SEX | DATE OF BIRTH | PLACE OF BIRTH (CITY OR TOWN AND STATE) | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT WHICH ISSUED NATURALIZATION PAPERS AND DATE OF PAPERS | ADDRESS IN UNITED STATES                |
|-----|--------------------|-----|-----|---------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 1   | Brownlow William   | 52  | M   | S May         | 3, 1883. - Philadelphia, Pa.            |                                                                                                       | 1804 Ashley St., Philadelphia, Pa.      |
| 2   | Burleigh Anna R.   | 59  | F   | S July        | 26, 1876. - Titusville, Pa.             |                                                                                                       | 331 McKee Pl., Pittsburgh, Pa.          |
| 3   | Gray Anna E.       | 28  | F   | S March       | 11, 1907. - Philadelphia, Pa.           |                                                                                                       | 2112 S. 19th St., Philadelphia, Pa.     |
| 4   | Gray Kathryn G.    | 25  | F   | S August      | 4, 1910. - Nevada, Mo.                  |                                                                                                       | 4930 Western Ave., Washington, D.C.     |
| 5   | Greene Dorothy     | 36  | F   | S July        | 30, 1899. - Bethlehem, Pa.              |                                                                                                       | St. Luke's Hospital, Bethlehem, Pa.     |
| 6   | Haines Elva M.     | 43  | F   | S May         | 23, 1892. - Parkersburg, Pa.            |                                                                                                       | 747 Gogutz Ave., Philadelphia, Pa.      |
| 7   | McGrath William V. | 62  | M   | S September   | 1, 1873. - Philadelphia, Pa.            |                                                                                                       | Barrett Rd., Upper Merion, Pa.          |
| 8   | McGrath Edith S.   | 59  | F   | M December    | 15, 1876. - Wilmington, Del.            |                                                                                                       | do. do.                                 |
| 9   | Sell Naomi L.      | 30  | F   | S May         | 8, 1905. - Quakertown, Pa.              |                                                                                                       | R.D.#2, Quakertown, Pa.                 |
| 10  | Sharp Edith R.     | 38  | F   | S May         | 18, 1897. - Philadelphia, Pa.           |                                                                                                       | 1200 Jerome St., Philadelphia, Pa.      |
| 11  | Sisson Daisy       | 51  | F   | S August      | 4, 1884. - Iowa, Mich.                  |                                                                                                       | St. Luke's Hospital, Bethlehem, Pa.     |
| 12  | Welch Mary Grace   | 27  | F   | S April       | 17, 1908. - Hastings, Neb.              |                                                                                                       | 150 So. Harrison St., East Orange, N.J. |
| 13  | Allen Paul P.      | 20  | M   | S December    | 7, 1914. - Stamford, Conn.              |                                                                                                       | 113 E. Chester Rd., New Rochelle, N.Y.  |
| 14  | Barr Martin        | 75  | M   | S February    | 17, 1860. - Wilmington, Del.            |                                                                                                       | Middletown, Del.                        |
| 15  | Bolton Morton D.   | 24  | M   | S June        | 8, 1911. - Brooklyn, N.Y.               |                                                                                                       | 920 Sumner St., Stamford, Conn.         |
| 16  | Bradley George G.  | 28  | M   | S December    | 21, 1906. - Hartford, Conn.             |                                                                                                       | 615 Gramatan Ave., Mt. Vernon, N.Y.     |
| 17  | Concha Reed        | 20  | M   | S June        | 23, 1915. - Middletown, Del.            |                                                                                                       | Middletown, Del.                        |



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(FOR THE IMMIGRATION AUTHORITIES)

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## Sailing from

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Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 1

# LIST OF UNITED STATES CITIZENS

FOR THE IMMIGRATION AUTHORITIES

*W. S. S.*

CULPHAW

sailing from

LAS PIEDRAS, VENEZUELA

September, 20th, 1925

Arriving at Port of

Philadelphia, September, 20th, 1925

, 192

| No.<br>per<br>List | NAME IN FULL<br>Family Name Given Name | Age<br>Yrs Mos | Sex | Method<br>of Birth | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES GIVE DATE AND<br>PLACE OF BIRTH CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF<br>COURT WHICH ISSUED NATURALIZATION<br>PAPERS, AND DATE OF PAPERS | ADDRESS IN UNITED STATES            |
|--------------------|----------------------------------------|----------------|-----|--------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------|
| 1                  | Horton Holland Harris                  | 52 5           | M   | N                  | March, 30th, 1883-Maple Rapids, Mich.                                                                                                 |                                                                                                             | Chamber Commerce<br>Houston, Texas. |
| 2                  | Horton Sophia G.                       | 44 0           | F   | N                  | September, 30th, 1889-Mexellia-Michocan-Mexico                                                                                        |                                                                                                             | " " "                               |

*Handwritten notes:*  
Holland Harris  
Sophia G.

*Handwritten signature:*  
W. S. S.  
Inspector







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number

# LIST OF UNITED STATES CITIZENS

(FOR THE IMMIGRATION AUTHORITIES)

S. S. "TELA"

sailing from PTO. HARRIOS, GUATEMALA, SEPT. 23rd, 1935, Arriving at Port of PHILADELPHIA, SEPTEMBER 29th, 1935

via Charlotte, N.C.

| No.<br>or<br>Last                                                  | NAME IN FULL |            | AGE | SEX | MARRIED | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE) |                 | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES            |
|--------------------------------------------------------------------|--------------|------------|-----|-----|---------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                                                                    | FAMILY NAME  | GIVEN NAME |     |     |         | Yrs                                                                                                                                      | Mos             |                                                                                                              |                                     |
| GROUP PASS-6-RS-1-R-0-0 AT PHILADELPHIA, PA. - SEPTEMBER 17th 1935 |              |            |     |     |         |                                                                                                                                          |                 |                                                                                                              |                                     |
| 1                                                                  | BLACK        | ERNEST     | 32  | 6   | M       | S                                                                                                                                        | March 9th 1903  | Philadelphia, Pa.                                                                                            | 54 Tyson Ave., Glenside, Pa.        |
| 2                                                                  | BUTT         | CLAUDE     | 37  | 10  | M       | S                                                                                                                                        |                 | Circuit Court, Anne Arundel County<br>Camp Meade, Md., Dec. 11th 1918                                        | 7 Waverly Rd., Wyncote, Pa.         |
| 3                                                                  | CRIVEN       | MARY       | 36  |     | F       | S                                                                                                                                        | Sept. 3rd 1899  | Seattle, Wash.                                                                                               | 4709 Pine Br. Rd., Washington, D.C. |
| 4                                                                  | CHICONE      | ANTHONY    | 31  |     | M       | S                                                                                                                                        | July 2nd. 1904  | Philadelphia, Pa.                                                                                            | Chancellor Hall, Philadelphia       |
| 5                                                                  | FRIEDMAN     | SADIE      | 29  |     | F       | S                                                                                                                                        | Dec. 22nd 1895  | Brooklyn, N.Y.                                                                                               | 1519 Negro Ave., Philadelphia, Pa.  |
| 6                                                                  | SIMPSON      | MARY       | 30  | 4   | F       | S                                                                                                                                        | May 5th 1905    | Vineland, N. J.                                                                                              | Oaklyn, N.Y.                        |
| 7                                                                  | GRIFFIS      | EARL       | 39  | 6   | M       | M                                                                                                                                        | March 18th 1896 | Florence, Kans.                                                                                              | The Fairmont, Jersey City, N.J.     |
| 8                                                                  | GRIFFIS      | MARGARET   | 29  | 8   | F       | M                                                                                                                                        | Jan. 29th 1906  | Chicago, Ill.                                                                                                | The Fairmont, Jersey City, N.J.     |
| 9                                                                  | GARELL       | MIRIAM     | 39  | 6   | F       | M                                                                                                                                        | April 5th 1897  | Philadelphia, Pa.                                                                                            | Seago Bldg., Hazleton, Pa.          |
| 10                                                                 | NORMANN      | VERA       | 49  | 9   | F       | S                                                                                                                                        | Dec. 12th 1885  | Philadelphia, Pa.                                                                                            | 11 Garfield Av., Collingswood, N.J. |
| 11                                                                 | LELAND       | HOWARD     | 31  | 10  | M       | S                                                                                                                                        | Nov. 24th 1893  | Brooklyn, N. Y.                                                                                              | 1437 Spruce St., Philadelphia, Pa.  |
| 12                                                                 | MARY         | NORMAN     | 40  | 5   | M       | S                                                                                                                                        | April 20th 1895 | Pittsburgh, Pa.                                                                                              | 395 Walter St., Pittsburgh, Pa.     |



1. 1/2



## AFFIDAVIT OF SURGEON

I, **CARL RAMUS**, **Surgeon of the U.S.S. "TELA"**, **Sailing therewith**, do solemnly, sincerely, and truly **swear** that I have had **Thirty Nine** years' experience as a Physician and Surgeon, and that I am entitled to practice as such by and under the authority of **THE NEW YORK STATE** **BOARD OF MEDICAL EXAMINERS**, and that I have made a personal examination of each of the aliens named herein, and that the foregoing Lists or Manifest Sheets, **ONE** in number, according to the best of my knowledge and belief, are full, correct, and true in all particulars, relative to the mental and physical condition of such aliens.

Carl Ramms, M.D.

Sworn to before me this \_\_\_\_\_ day of **SEPTEMBER**, 19**35**

[illegible]

## LIST OF NAMES OR PEOPLE

There is nothing to be gained from the fact that with these animals and in different situations, *Phrynosoma* is found with the head of the plant eaten, the mouth open to the degree of a wide protrusion of the mandibles.



ALL ALIENS arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of the insular possessions of the United States, shall be subject to the following regulations:

This pink sheet is for the listing of

S. S. "TELA"

*Passengers sailing from* PTO. BARRIOS, GUATEMALA

SE T. 23rd, 1985

| No. on list | HEAD-TAX STATUS | NAME IN FULL |            | Age       | Sex               | Calling or occupation | Able to |                                               | Nationality                         | Race or people       | Place of birth |                                           | Immigration Visa, Passport Visa, or Entry Permit number | Issued    | Data concerning previous status of resident, etc. | Last permanent residence |                                           |
|-------------|-----------------|--------------|------------|-----------|-------------------|-----------------------|---------|-----------------------------------------------|-------------------------------------|----------------------|----------------|-------------------------------------------|---------------------------------------------------------|-----------|---------------------------------------------------|--------------------------|-------------------------------------------|
|             |                 | Family name  | Given name | Yrs. Mos. | Married or single |                       | Read    | Read and understand or write in what language | Country of which citizen or subject |                      | Country        | City or town, State, Province or District |                                                         | Place     | Date                                              | Country                  | City or town, State, Province or District |
| 1           |                 | ESCAMILLA    | ELISA      | 30        | F S               | Student               | Yes     | Spanish English                               | Yes                                 | Guatemalte Span-Amer | Guatemala      | Villa Canales                             | N. IV #24                                               | Guatemala | 9/21/35                                           | Guatemala                | City                                      |



## List

States, or a port of another insular possession, in whatsoever class they travel, MUST be fully listed and the master or commanding officer of each vessel carrying such passengers must upon arrival deliver lists thereof to the immigration officer.

SEPTEMBER 29th 1935

$$\begin{array}{r} 9-27-1 \\ \hline \end{array}$$
[illegible]



## 1

[illegible]MASTER ~~SECRET~~

Immigration Officer.

[illegible][illegible]



(FOR THE IMMIGRATION AUTHORITIES)

## Sailing from

alvaro Obregon, Mexico - Sept 20

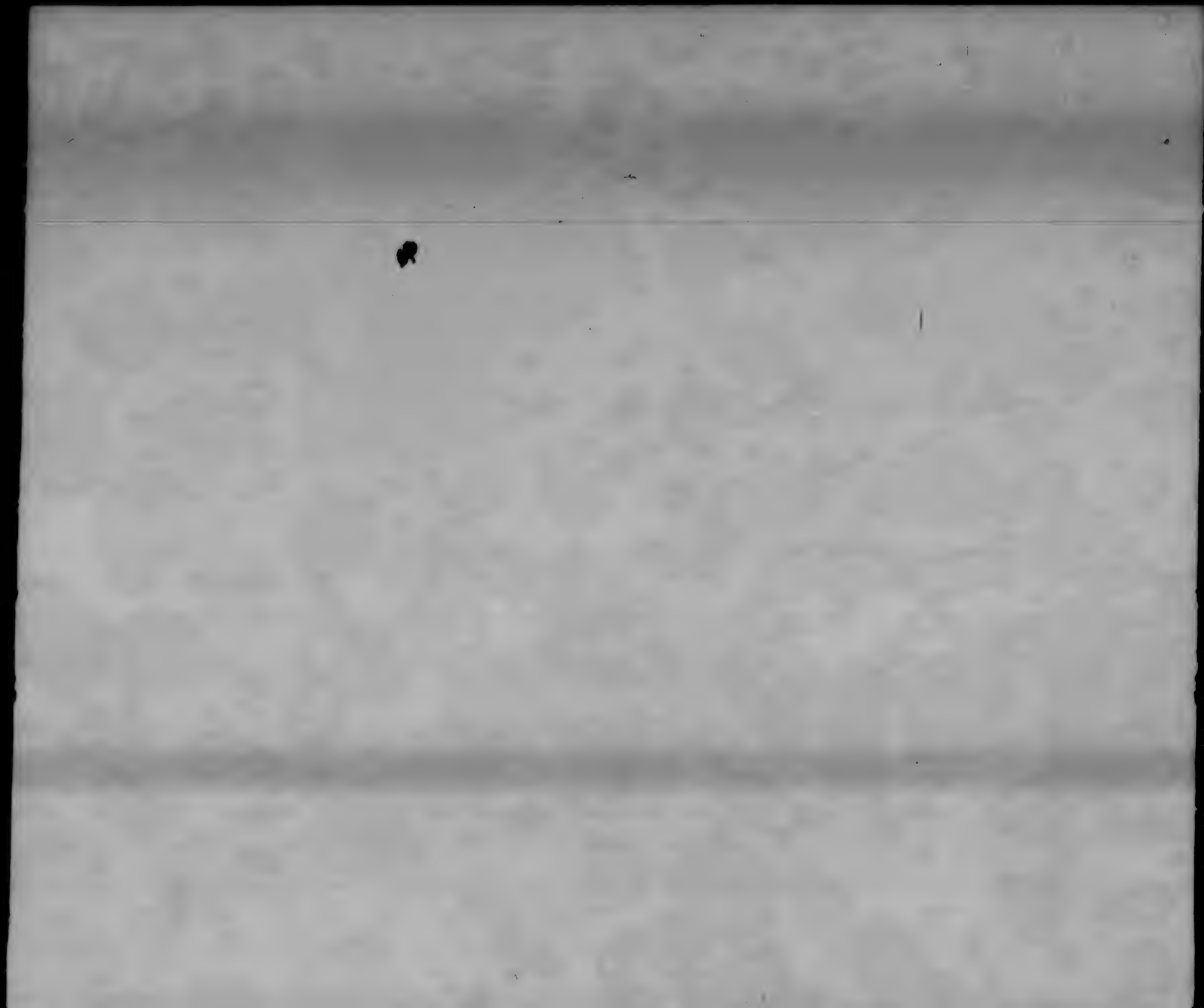
, 19 , Arriving at Port of

19

| No.<br>on<br>List | NAME IN FULL |             | AGE |      | Sex | Married<br>or Single | IF NATIVE OF UNITED STATES INCLUDE POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH, CITY OR TOWN AND STATE | IF NATURALIZED GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS<br>AND DATE OF PAPERS | ADDRESS IN UNITED STATES           |
|-------------------|--------------|-------------|-----|------|-----|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME  | Yrs | Mos. |     |                      |                                                                                                                                         |                                                                                                            |                                    |
| 1                 |              |             | ✓   | 11   |     |                      | September 30th 1909                                                                                                                     |                                                                                                            | 122 Richmond St. Dorchester, Mass. |
| 2                 | Lynch        | Anna M      | 35  | 10 F | ✓   |                      | Native, Mass. November 17th 1873                                                                                                        |                                                                                                            | 18 Davis St. Belmont, Mass.        |
| 3                 | Fing         | Alma        | 36  | 1 F  | ✓   |                      | Brooklyn, N.Y. August 4th 1873                                                                                                          |                                                                                                            | 80 Van Wyken St. Jersey City, N.J. |
| 4                 | Feely        | Beatrice R  | 40  | 5 F  | ✓   |                      | New York, N.Y. (Mar 1874)                                                                                                               |                                                                                                            | 80 St. Anne Place, Boston, Mass.   |
| 5                 | Feely        | Katherine V | 24  | 1 F  | ✓   |                      | New York, September 4th 1911                                                                                                            |                                                                                                            | 80 St. Anne Place, Boston, Mass.   |
| 6                 | Rosenfeld    | Ethel       | 35  | 1 F  | ✓   |                      | New York, June 18th 1874                                                                                                                |                                                                                                            | 80 St. Anne Place, Boston, Mass.   |
| 7                 | Belmont      | Selen       | 27  | 1 F  | ✓   |                      | New York, N.Y. 1876                                                                                                                     |                                                                                                            | 80 St. Anne Place, Boston, Mass.   |
|                   | Harper       | William C   | 25  | 1 M  | ✓   |                      | Philadelphia, Pa. 1878                                                                                                                  |                                                                                                            | 80 St. Anne Place, Boston, Mass.   |

U. S. IMMIGRANT INSPECTION







Record on this blank United States citizens and citizens of insular possessions of the United States arriving at a port of continental United States from a foreign port or a port of the insular possessions of the United States, and such citizens arriving at a port of said insular possessions from a foreign port, a port of continental United States, or a port of another insular possession.

Number 2

# LIST OF UNITED STATES CITIZENS (FOR THE IMMIGRATION AUTHORITIES)

*Hond.*

S. S. "CEIBA"

Sailing from ALVARO OREGON, TAB, MEX.

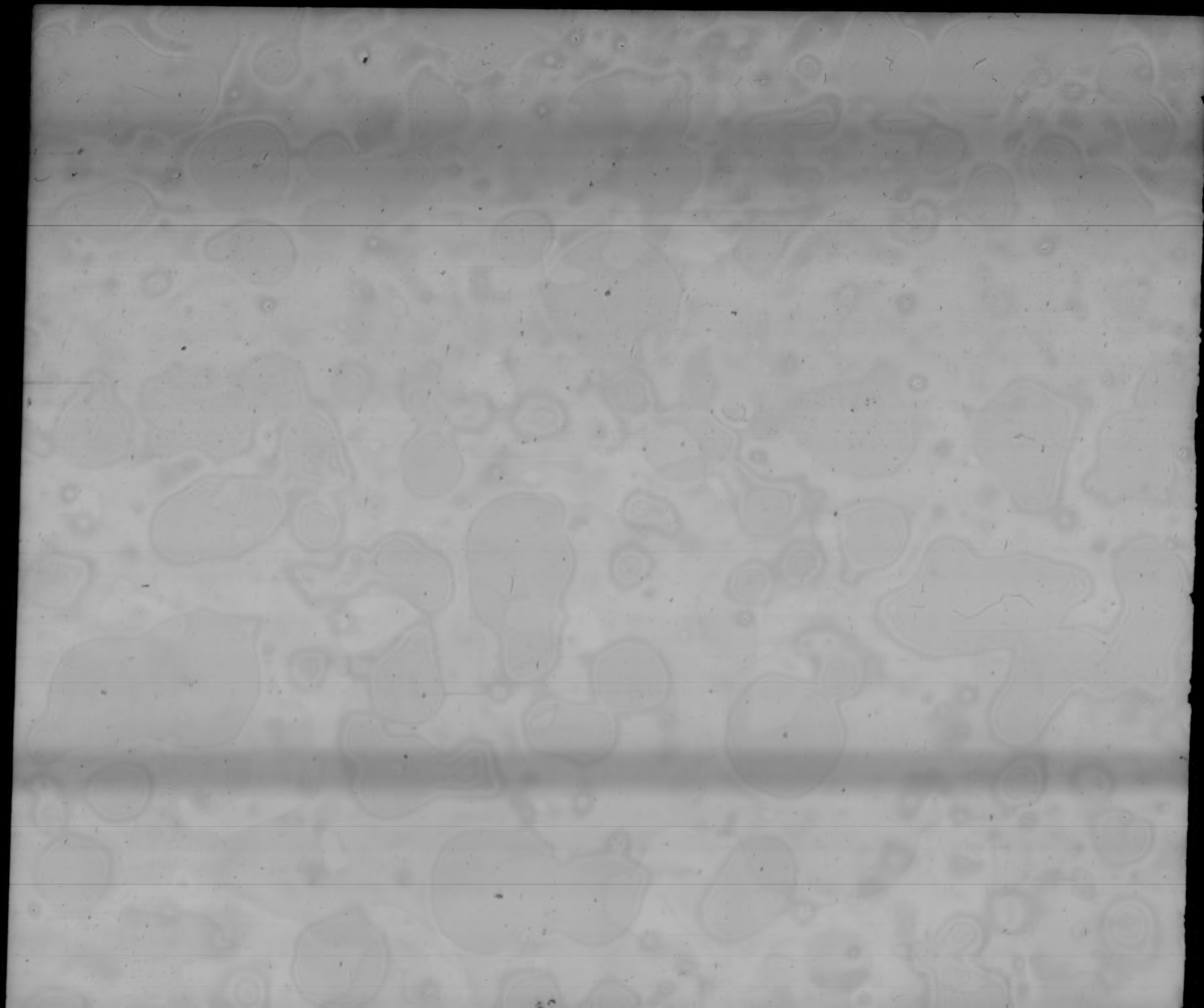
SEPTEMBER 24th, 19 35, Arriving at Port of PHILADELPHIA, PA. SEPTEMBER

30th, 19 35.

| No.<br>ON<br>LIST | NAME IN FULL |            | AGE  |      | Sex | MARRIED<br>OR SINGLE | IF NATIVE OF UNITED STATES INSULAR POSSESSION OR<br>IF NATIVE OF UNITED STATES, GIVE DATE AND<br>PLACE OF BIRTH (CITY OR TOWN AND STATE). | IF NATURALIZED, GIVE NAME AND LOCATION OF COURT<br>WHICH ISSUED NATURALIZATION PAPERS,<br>AND DATE OF PAPERS. | ADDRESS IN UNITED STATES                                                     |
|-------------------|--------------|------------|------|------|-----|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
|                   | FAMILY NAME  | GIVEN NAME | Yrs. | Mos. |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 1                 | Samuel H.    | Morrison   | 33   | 2    | M   | S                    | Minneapolis, Minn.<br><del>Chicago, Ill.</del> Jan. 2, 1902.                                                                              |                                                                                                               | Case of single - David W. Morrison,<br>65 East Division St.<br>Chicago, Ill. |
| 2                 |              |            |      |      |     |                      | Examined + passed SEP 30 1935                                                                                                             |                                                                                                               |                                                                              |
| 3                 |              |            |      |      |     |                      | Lee B. Dolch                                                                                                                              |                                                                                                               |                                                                              |
| 4                 |              |            |      |      |     |                      | U. S. IMMIGRANT INSPECTOR                                                                                                                 |                                                                                                               |                                                                              |
| 5                 |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 6                 |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 7                 |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 8                 |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 9                 |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 10                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 11                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 12                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 13                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 14                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 15                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 16                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 17                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 18                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 19                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 20                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 21                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 22                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 23                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 24                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 25                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 26                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 27                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 28                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 29                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |
| 30                |              |            |      |      |     |                      |                                                                                                                                           |                                                                                                               |                                                                              |

*William*







UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

MICROPHOTOGRAPHIC CERTIFICATION

I hereby certify that I am the legal custodian of the original record of the manifests of arriving aliens and United States citizens and of crew lists of arriving vessels duly delivered to the immigration authorities at the PHILADELPHIA, PA. District Office, contained in the volumes enumerated below for vessels arriving in the ..... immigration district on the date indicated: PHILADELPHIA, PA.

277- July-1- 1935  
To Sep 30-

that microphotographic copies of the above described original records appear on this roll of film; that in conformity with instructions received by me from the Commissioner of Immigration and Naturalization I caused originals to be microphotographed under my supervision and compared with the original documents; that the images appearing on this roll of microfilm are true and complete photographic copies of the above described original records; and that said original records have been microphotographed to serve as permanent records in accordance with all the requirements of Public Law 78 Congress, First Session, approved July 7, 1943, and of the regulations promulgated by the National Archives Council and approved by the President of the United States in accordance with the provisions of Section 2 of said Act.

Executed in the County of Philadelphia, Commonwealth of Pennsylvania, this..... day of..... 1945

OCT 26 1945

CHIEF,  
Information, Mail and Files Section  
Central Office  
Immigration and Naturalization Service

CERTIFICATE OF CAMERA OPERATOR

I hereby certify that the microphotographic images appearing on this roll of film are true and complete microphotographic copies of original records of the Immigration and Naturalization Service described above. I operated the camera at the time these records were microphotographed.

OCT 26 1945

Date

Camera Operator



